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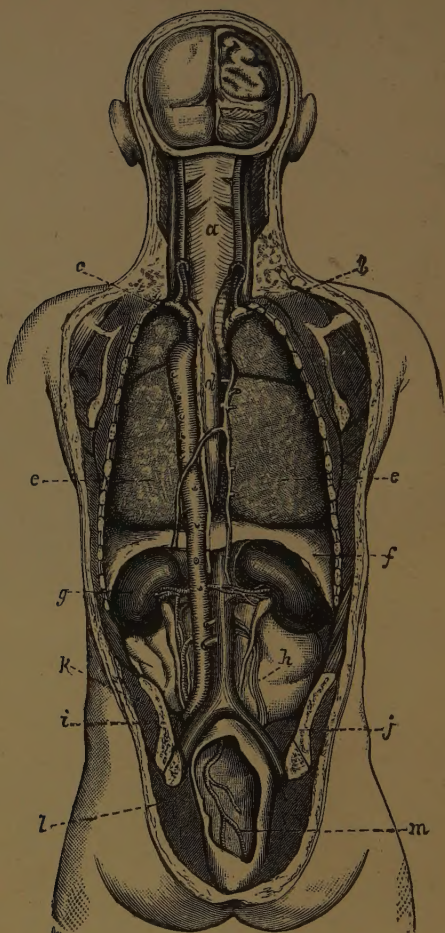
THE BOSTON
R. July 1, 1901
Medical and Surgical
JOURNAL.

AN
INDEX OF SYMPTOMS

REVIEW OF FIRST EDITION.

‘The author of this little book is to be congratulated upon the happy thought which prompted its compilation. . . . Dr. Leftwich has added a chapter on Methods of Diagnosis, for the use of clinical clerks, which furnishes many valuable hints. So far as we have tested this book it appears to be remarkably free from errors, and to be likely to be very serviceable in its suggestiveness. . . . Altogether, the author has succeeded in producing a little book of undoubted novelty and utility.’

LANCET.



VIEW OF THE VISCERA &c. FROM BEHIND (Treves after Rüdinger)

a, pharynx; *b*, innominate artery; *c*, subclavian artery; *d*, œso-phagus, with the aorta and thoracic duct on one side and the azygos vein on the other; *e*, lungs; *f*, diaphragm covering liver; *g*, kidney; *h*, on peritoneum, points to spermatic vessels crossed by ureter; *i*, os innominatum above sacroiliac synchondrosis; *j*, psoas; *k*, gluteus medius; *l*, gluteus maximus; *m*, rectum and sup. hæmorrhoidal artery

AN
INDEX OF SYMPTOMS

AS A CLEW TO DIAGNOSIS

BY

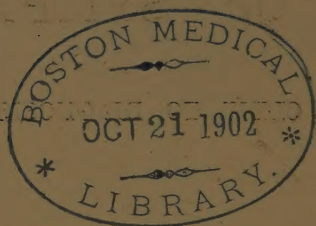
RALPH WINNINGTON LEFTWICH, M.D.

LATE ASSISTANT-PHYSICIAN TO THE EAST LONDON
CHILDREN'S HOSPITAL

Nihil humani a me alienum puto

SECOND EDITION

NEW YORK
WILLIAM WOOD & COMPANY
MDCCCCI



2936

PREFACE

TO

THE SECOND EDITION

THE present edition has been re-written and will be found superior to the first in many points. The limitations as to surgery and its allies still hold good ; but the number of such diseases and symptoms has been very greatly extended, everything that has any bearing upon medicine proper having been included. Apart from the domain of the specialist, it is believed that almost every known symptom has been embodied here, in one form or another. The reader, however, must not expect to find a dictionary of etiology as well as of symptoms.

The labour involved in the production and revision of this little work has been out of proportion to its size. The writer of a small handbook of Medicine need do little more than condense the

work of his predecessors. But this book has had no forerunner, and its preparation has necessitated not only the arrangement and classification of symptoms, but the scrutiny of many hundreds of the works of the best English, American, French, and German authors. One of the greatest difficulties has been erratic nomenclature. Probably writers find the list of the College of Physicians insufficiently comprehensive. Certainly the official work would be much more valuable if it included a complete list of synonyms. Where, therefore, a doubt exists as to whether two differently named diseases are identical, the writer who favours duality has been followed.¹ In order to mitigate the difficulty a page of synonyms has been added.

The long list of diseases following a given

¹ Notwithstanding the fact that there are many more names than there are diseases to fit them, the writer ventures to suggest an addition. While there are three ways of expressing fibrous change in an organ, there is no short way of indicating fatty change. Fatty degeneration of the heart, for instance, is not a name, but a description, and a faulty one at that; for, in the living subject, the change is not 'fatty' nor is it even 'greasy,' as the French term the condition. It is oily. The Greek for oil (*ἔλαιον*) does not lend itself to composition; but a convenient suffix would be 'lysis' (*λύω*, I dissolve), used in the sense of disintegration, as in the word 'electrolysis.' Instead of clumsy circumlocutions we should then have the words 'cardiolysis,' 'hepatolysis,' 'nephrolysis,' etc. The author, however, has not ventured to introduce these terms into the text.

symptom must have a bewildering effect upon the novice. A star, therefore, has been placed against the probable or characteristic disease. Every effort too has been made to facilitate reference, each symptom having been numbered, and the index made more copious, while the general arrangement has taken the columnar form.

The writer takes this opportunity to thank the numerous members of the profession who have expressed their appreciation of his work, and to make his grateful acknowledgments to the authors whose writings have been utilised.

R. W. L.

32 BUCKINGHAM GATE, S.W.

PREFACE

TO

THE FIRST EDITION

THE physician, in endeavouring to make a diagnosis, seizes first upon a few prominent features, which will enable him to say that the disease is one of, perhaps, a dozen. He then looks carefully for further symptoms, and these, by a process of exclusion, gradually point to but one ailment. Should he find himself at fault, and conclude that no disease, with which he is familiar, is consistent with the particular grouping of symptoms in the case before him, he naturally refers to his books. Here he meets with a fresh difficulty; for, in his text-books of medicine, in his Dictionary of Medicine, and even in his Handbook of Diagnosis, he finds, with rare exceptions, that diseases, not symptoms, form the headings; the order being therefore the exact reverse of that which takes place in his own brain. He has consequently to wade through page after page and book after book before he succeeds, or is satisfied that he has failed, in the object of his search.

The author felt this inconvenience very acutely in his earlier years of practice ; and made, some eight years ago, a classification of symptoms for personal use from Niemeyer's 'Text-book of Practical Medicine.' This has since been slowly extended by reading and observation, until it now reaches about four times its original bulk. He has found it of great use, and is not without hope that others may derive some benefit from it.

It is, perhaps, inevitable that some few errors should creep into a work of this kind. For those of commission, the author has no excuse to offer. Of omissions, some are only apparent ; for symptoms which many writers give under the heading of a particular disease relate, not to the disease itself, but to one of its complications. In such a case the reference might reveal only the latter, though, as a general rule, the author has chosen to be practical rather than strictly logical, and has inserted both. This arrangement has the double advantage of making the book more useful to the practitioner and less so to the mere cramming student. The nomenclature employed is that of the College of Physicians—English or Latin—a single word being preferred to a phrase ; but where both are cumbersome, it has in a few instances been departed from.

The adoption of what may be termed generic symptoms has, by avoiding repetition, been found of service in keeping the book within pocket dimensions.

The order of the symptoms is approximately that in which a case is usually taken. That of the diseases is roughly alphabetical.

A student, in consulting this little work, should have at hand a Dictionary of Medicine, and for this purpose none is better than Quain's, to the contributors to which the author is under great obligations, not only for their articles, but also for their separate published works. Should something more portable be desired, Tanner's 'Index of Diseases' would answer the purpose.

It must not be supposed that each symptom is met with constantly in all the diseases placed after it. The author's presumption is that the physician in a difficulty is asking the question, 'To what disease or condition may this symptom point?' An attempt has been made to indicate in some measure the relative frequency of occurrence, and by other information to assist in differential diagnosis. But surgical diseases and those on its borderland, as laryngeal, skin, and uterine affections, where the diagnosis so much depends on the skilled interpretation of a single symptom, are not suited for classification and have therefore been inserted chiefly where their omission might have led to error. The word 'symptom,' it is scarcely necessary to say, is taken in its broadest sense, and includes every factor in the diagnosis.

R. W. L.

LONDON.

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Nutrition—Skin—Head—Face—Expression—Ears—Eyes—Nose—Mouth—Tongue—Fauces—Larynx—Neck—Chest—Back—Abdomen—Limbs—Joints—Genitals—Micturition—Urine—Stools—Vomit—Sputa—Blood—Bacilli—Breathing—Decubitus—Gait—Handwriting—Ataxia—Paralysis—Reflexes—Rigidity—Electricity—Intellect—Emotions—Voice—Cough—Odour—Temperature	56
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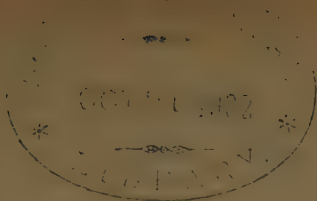
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INDEX OF SYMPTOMS

PART I

INTERROGATION, INCLUDING SUBJECTIVE SYMPTOMS

CONTRACTIONS : s, sometimes ; u, usually ; x, exceptionally ; i, first stage ; ii, second stage ; iii, third stage ; *, the most probable or characteristic disease.

SYMPTOMS ELICITED BY INTERROGATION

AGE

1. Congenital Affections

Achondroplasia
Atelectasis
Dislocations of Hip, etc.
Hæmophilia
Hydrocephalus
Infantile Hemiplegia ($\frac{1}{3}$)
Ichthyosis
Idiocy
Icterus neonatorum
Malformations
Nævi
Pemphigus
Progressive Muscular
Atrophy

Pseudo - hypertrophic
Paralysis (x)
Pylorus, Hypertrophy of
Sclerema
Syphilis
Tetanus neonatorum
Thomsen's Disease

2. Infancy

Amyloid
Capillary Bronchitis
Convulsions
Cretinism
Diarrhoea
Diphtheria
Eczema
Glandular Fever

INFANCY—continued

Hydrocephalus
 Spurious Hydrocephalus
 Impetigo contagiosa
 Infantile Hemiplegia
 Intertrigo
 Intussusception
 Laryngismus stridulosus
 Spasmodic Laryngitis
 Measles
 Infantile Paralysis
 Lobular Pneumonia
 Post-pharyngeal Abscess
 Rickets
 Rötheln
 Scarlatina
 Infantile Scurvy
 Seborrhœa
 Spasmus nutans
 Strophulus
 Hereditary Syphilis
 appears at 2 to 6 weeks
 Syphilitic Pemphigus
 Syphilitic Disease of Lungs
 Tetany
 Varicella

3. Childhood

Adenoids
 Amyloid
 Capillary Bronchitis
 Soft Cataract
 Chorea

Convulsions
 Coxa vara
 Diphtheria
 Encephaloid
 Endocarditis
 Enteric Fever
 Epilepsy
 Floating Kidney (x)
 Friedreich's Disease
 Glandular Fever
 'Growth Fever'
 Hooping Cough
 Hydrocephalus
 Impetigo contagiosa
 Intussusception
 Laryngismus stridulosus
 Measles
 Meningitis
 Mumps
 Mucous Disease
 Noma
 Œdema laryngis
 Polypus
 Post-pharyngeal Abscess (under 4)
 Pseudo-hypertrophic Paralysis
 Paralysis, Infantile (under 5)
 Rhinitis, Atrophic
 Rheumatic Nodules
 Rickets
 Ringworm

CHILDHOOD—*continued*

Roseola
 Rötheln
 Roundworms
 Scarlatina
 Tetany
 Thomsen's Disease (4
 to 6)
 Tubercle of Bones, etc.
 Threadworms
 Varicella

4. Adolescence

Acne
 Addison's Disease
 Anæmia
 Apoplexy (Spinal)
 Appendicitis
 Catalepsy
 Chlorosis
 Coxa vara
 Chronic Atrophic Rhin-
 itis
 Dementia, Acute Prim-
 ary
 Diabetes Insipidus
 Endocarditis
 Enteric Fever
 Epilepsy
 Exophthalmic Goitre
 Exostosis
 Friedreich's Disease
 Glandular Swellings
 Goitre
 Hysteria

Meningitis of all kinds
 Mollities Ossium
 Myocarditis
 Myxcedema
 Œdema Laryngis
 Phthisis
 Progressive Muscular
 Atrophy
 Rheumatic Fever
 Rhachitis adolescen-
 tium
 Spasmodic Spinal Para-
 lysis
 Sacro-iliac Disease
 Softening of Brain from
 Emboli
 Syringomyelia
 Acute Tuberculosis
 Trance
 Ulcer of Stomach

5. Adults

Actinomycosis (20 to
 30)
 Disseminated Sclerosis
 Endocarditis
 Gastralgia
 Hæmorrhage into Cord
 Phthisis
 Primary Spastic Para-
 plegia (20 to 40)
 Acute Ascending Para-
 lysis
 Peliosis rheumatica
 Progressive Muscular
 Atrophy

ADULTS—continued

Symmetrical Adenolipomatosis
 Serratus Magnus Palsy (25 to 40)
 Syringomyelia (15 to 35)
 Ulcer of Stomach or Bladder
 Acute Yellow Atrophy

6. Middle Age

Addison's Disease
 Aneurysm
 Angina Pectoris
 Apoplexy
 Cancer of Stomach, Liver, Larynx, Rectum, Uterus, or Breast
 Cirrhosis of Liver or Kidney
 Cystic Kidney
 Diabetes
 Dupuytren's Contraction
 Dissecting Aneurysm
 Endocarditis
 Epithelioma
 Exophthalmic Goitre
 Fatty Degeneration of Heart
 Gallstones
 Gout
 Hæmorrhage into Cord
 Hypochondriasis
 Locomotor Ataxy
 Melancholia

Mollities Ossium
 Myxœdema
 Nephritis (chronic)
 Pernicious Anæmia
 Progressive Muscular Atrophy
 Acute Ascending Paralysis
 Primary Spastic Paraplegia
 Paralysis agitans
 General Paralysis of Insane
 Bulbar Paralysis
 Disseminated Sclerosis
 Symmetrical Adenolipomatosis (20 to 58)
 Sciatica
 Stricture of Rectum
 Embolic Softening of Brain
 Serratus Magnus Palsy
 Syringomyelia
 Ulcer of Stomach or Colon
 Weil's Disease
 Acute Yellow Atrophy

7. Old Age

Aortitis
 Apoplexy
 Arterio-sclerosis
 Aneurysm
 Angina Pectoris
 Brachial Neuritis

OLD AGE—*continued*

Capillary Bronchitis
 Cataract
 Cancer
 Cancer of Larynx
 Dissecting Aneurysm
 Ecthyma
 Epithelioma
 Exophthalmic Goitre
 (men)
 Fatty Degeneration of
 Heart
 Gout
 Melancholia
 Paralysis agitans
 Phthiriasis
 Prostatic Disease
 Pemphigus
 Pruritus
 Thrombosis
 Rodent Ulcer

**PREPONDERATING
 SEX**

8. Male

Aneurysm in General
 Abdominal Aneurysm $\frac{8}{1}$
 Addison's Disease $\frac{2}{1}$
 Angina Pectoris
 Alcoholism
 Actinomycosis $\frac{3}{1}$
 Aortitis
 Acute Ascending Para-
 lysis
 Bulbar Paralysis

Cancer of Rectum or
 Stomach
 Primary Cancer of
 Kidney
 Cystic Kidney $\frac{2}{1}$
 Cirrhosis of Liver $\frac{3}{1}$
 Cirrhosis of Kidney $\frac{2}{1}$
 Cirrhosis of Stomach
 Colour Blindness
 Diabetes
 Diabetes Insipidus $\frac{2}{1}$
 Dupuytren's Contraction
 $\frac{20}{1}$
 Emphysema
 Exostosis
 Fatty Degeneration of
 Heart
 Gastritis, Chronic
 Gout
 Hæmorrhage into Cord
 Hypertrophy of Heart
 Hæmatoma Auris
 Hæmophilia
 Hypochondriasis
 Intermittent Hæmo-
 globinuria
 Intussusception
 Laryngeal Affections
 Leucocythæmia $\frac{2}{1}$
 Lymphadenoma $\frac{3}{1}$
 Meningitis Simplex $\frac{2}{1}$
 Meningitis, Cerebro-
 Spinal
 Meningitis, Internal
 Spinal

MALE—continued

Mumps
 Myocarditis
 Peliosis rheumatica
 Pneumonia
 Paralysis of Insane,
 General
 Pseudo - hypertrophic
 Paralysis
 Spasmodic Spinal Para-
 lysis
 Syringomyelia
 Serratus Magnus
 Palsy $\frac{2}{1}$
 Ulcerative Endo-
 carditis $\frac{3}{1}$
 Valvular Disease
 Weil's Disease

9. Female

Acroparesthesia
 Anæmia
 Atrophy of Heart $\frac{7}{5}$
 Atrophy, Acute Yellow
 especially during pregnancy
 Chronic Atrophic
 Rhinitis $\frac{7}{2}$
 Catalepsy
 Chorea $\frac{3}{1}$
 Constipation
 Chlorosis
 Dementia, Acute Prim-
 ary
 Enteroptosis $\frac{1}{1}$ ⁵
 Erythema nodosum

Facial Hemiatrophy
 Floating Kidney
 Gastralgia
 Gallstones $\frac{7}{2}$
 Goitre
 Goitre, Exophthalmic
 Hysteria
 Lupus Erythematosus $\frac{5}{1}$
 Mitral Stenosis
 Mollities Ossium $\frac{3}{1}$ ⁰
 Myxœdema
 Neuralgia
 Pulsating Aorta
 Stricture of Rectum
 Scleroderma
 Trance
 Ulcer of Stomach

OCCUPATION**10. Active**

Aneurysm
 Pneumonia, Acute
 Rheumatic Fever
 Tetanus

11. Sedentary

Anæmia
 Chlorosis
 Constipation
 Dyspepsia
 Gastritis
 Gallstones
 Gout
 Hæmorrhoids
 Hysteria

SEDENTARY—continued

Hypochondriasis
 Neuroses
 Phthisis
 Ulcer of Stomach

12. Trades

Bakers	}	Lichen agrius
Grocers		
Bricklayers		
Painters	}	Lead- poisoning
Plumbers		
White-lead makers		
		Gout

Cooks : Eczema, Ery-
 thema

Dusty Trades	}	Cirrhosis of Lungs
		Chronic Laryn- gitis

Domestic Servants : An-
 æmia, Gastric Ulcer,
 Erythema nodosum

Skin Dressers	}	Anthrax
Wool Sorters		

Sweeps : Cancer of Scro-
 tum

Furriers : Arsenic-poi-
 soning, Mercurialism

Looking-glass Makers :
 Mercurialism

Corn Trades : Actino-
 mycosis

Bird Fanciers : Psitta-
 cosis

Divers : Caisson Disease

13. Occupation Neuroses

Clerks : Writer's Cramp

Elocutionists	{	Laryn- geal Spasm
Flautists		

Telegraphists	{	Cramps
Violinists		
Typists		

Tailors	{	Clonic & Tonic Spasms
Sempstresses		
Shoemakers		

HISTORY**14. Hereditary Diseases**

Acne

Arterio-sclerosis

Asthma, Hay

Asthma, Spasmodic

Apoplexy

Cancer

Calculus

Cerebellar Heredo

Ataxy (same family)

Colour-blindness, Con-
 genital

Degenerative Affections
 in general

Diabetes

Diabetes Insipidus

Dupuytren's Con-
 traction

Epilepsy

Eczema

Emphysema

Friedreich's Disease

Facial Hemiatrophy (s)

HEREDITARY DISEASES—

continued

Gout

Hæmophilia

Huntington's Chorea

Heart Disease

Hysteria

Hypochondriasis

Ichthyosis

Insanity

Laryngismus stridulous

Leprosy (?)

Malformations

Migraine

Neuroses

Nævus

Neurasthenia

Œdema, Circumscribed

Phthisis (?)

Psoriasis

Pseudo - hypertrophic
Paralysis

boys of same family

Rheumatism

Rheumatoid Arthritis

Rheumatic Fever

Syphilis

Thomsen's Disease

Tumours

Tuberculosis

**15. Previous Attack
Favours**

Ague

Angina Pectoris

Appendicitis

Apoplexy

Asthma, Hay

Asthma, Spasmodic

Delirium Tremens

Diphtheria

Epilepsy

Erysipelas

Gout

Gallstones

Hæmoglobinuria, Inter-
mittent

Lead-poisoning

Migraine

Neuralgia

Pneumonia

Quinsy

Renal Colic

Rheumatism

Rheumatic Fever

Tonsillitis

**16. Previous Attack makes
Doubtful**

Enteric

Hooping Cough

Measles

Mumps

Rötheln

Scarlatina

Typhus

Variola

Varicella

Yellow Fever

17. History of a Fall in Childhood

Caries of Spine
 Epilepsy (esp. Jacksonian)
 Tubercular Arthritis

18. Sudden Onset

Acute Diseases in general

Ague
 Angina Pectoris
 Asthma
 Apoplexy, Cerebral
 Apoplexy, Spinal
 Apoplexy, Pulmonary
 Appendicitis
 Caisson Disease
 Catalepsy
 Cholera
 Colic
 Colic, Renal
 Colic, Hepatic
 Dengué
 Erysipelas
 Epileptic Fit
 Embolism, Cerebral
 Embolism, Renal
 Glandular Fever
 Gout
 Hæmorrhage in general
 Hæmorrhage, Spinal
 Intermeningeal
 Hæmatocele, Pelvic

Infantile Paralysis
 Influenza
 Jaundice (obstructive)
 Kussmaul's Disease
 Laryngismus stridulosus
 Meningitis, Cerebro-spinal
 Meningitis, Internal Spinal
 Menière's Disease
 Mania
 Neuralgia
 Pneumonia, Croupous
 Paralysis, Acute Bulbar
 Paralysis, Acute Spinal (adults)
 Pyæmia
 Pleurisy, Acute
 Pyelitis, Acute
 Peritonitis, Acute
 Rheumatic Fever
 Syncope
 Tuberculosis, Acute
 Thrombosis in general
 Trance
 Valve Cusp, Rupture of

19. Gradual Onset

Acromegaly
 Ascites
 Amyloid
 Ataxic Paraplegia
 Bulbar Paralysis
 Cirrhosis of any Organ

GRADUAL ONSET—*continued*

Cancer
 Chorea
 Cerebral Tumours
 Dilatation of Stomach
 Enteric
 Hooping Cough
 Myelitis, Chronic
 Phthisis
 Pernicious Anæmia
 Sclerosis, Disseminated
 Transverse Softening of Cord
 Tumours of Cord
 Chronic Diseases in general
 Exposure to Infection
 (see *Propagation*, 975)

DURATION

20. Acute Diseases

Apoplexy
 minutes to days
 Angina Pectoris
 minutes to hours
 Asthma, Spasmodic
 one hour to several days
 Ague
 paroxysm u. 5 to 6 hours
 Buhl's Disease
 2 weeks
 Bell's Mania
 3 days to 3 weeks

Catalepsy
 minutes to hours or days
 Chancre, Hard
 incubation 3 to 5 weeks
 Chancre, Soft
 incubation little or none
 Dengué
 invasion 3 days; rash
 1 to 2 days; remission
 2 to 4 days
 Diphtheria
 incubation $\frac{1}{2}$ to 4 days;
 invasion 3 to 4 days;
 membrane 1 to 7 days;
 paralysis begins 8 to 12
 days after recovery
 Enteric Fever
 incubation 3 weeks; in-
 vasion 11 days; rash 10
 days
 Erysipelas
 incubation 15 to 60 hours
 Gallstones
 u. a few hours
 Glandular Fever
 incubation 7 days; disease
 14 days
 Glanders
 incubation 3 to 8 days;
 invasion 3 to 4 weeks;
 developed stage 2 to 20
 days
 Herpes zoster
 u. 10 to 20 days
 Hydrophobia
 incubation u. 6 to 7 weeks;
 disease 1 to 4 days
 Hooping Cough
 incubation 10 days; in-
 vasion 7 days

ACUTE DISEASES—*continued*

Influenza

incubation 2 to 3 days;
disease 4 to 5 days

Mumps

incubation 8 to 21 days;
swelling 8 to 10 days

Measles

incubation 10 to 12 days;
invasion 3 to 4 days;
rash 4 to 6 days

Myelitis, Acute

a few hours

Nephritis, Acute

3 to 10 weeks

Petit Mal

a few seconds

Pneumonia, Acute

5 to 7 days

Pneumonia serpens

2 to 3 weeks

Plague

incubation 3 to 5 or 7
days

Psittacosis

30 days
incubation 7 to 12 days;
high fever 3 to 4 days

Paralysis, Acute Ascending

a few days when fatal

Roseola

4 to 7 days—face first

Remittent Fever

5 to 14 days

Rötheln

incubation 2 to 3 weeks,
but variable; invasion
about 12 hours; rash
3 days

Relapsing Fever

pyrexial stage 5 to 7 days;
sweating 8 to 9 hours;
interval 6 to 8 days or
more; second attack 3
to 4 days

Spasmus nutans

3 weeks to 3 months

Spinal Meningeal Hæmorrhage

fatal cases a few hours

Scarlatina

incubation 8 to 9 days;
invasion $\frac{1}{2}$ to 2 days;
rash 3 to 5 days

Typhus

incubation 7 days; in-
vasion 4 to 5 days; rash
8 to 9 days; deferves-
cence 7 days

Tuberculosis, Acute

a few days to a few weeks

Variola

incubation 12 days; in-
vasion 2 days; rash 8
to 10 days

Varicella

incubation 12 days; in-
vasion a few hours;
rash 5 to 10 days

Weil's Disease

10 to 15 days

Yellow Atrophy, Acute

2 to 3 weeks

21. Chronic Diseases

Acromegaly

10 to 20 years

Addison's Disease

2 to 3 years

CHRONIC DISEASES—*continued*

Amyloid
 years
 Chorea
 1 to 4 months
 Cancer, Encephaloid
 about 1 year
 Cancer, Scirrhus
 about 2 years
 Distoma pulmonale
 hæmoptysis 10 to 15 years
 Exophthalmic Goitre
 months or years
 Friedreich's Disease
 years
 Idiopathic Muscular
 Atrophy
 years
 Kidney, Contracted
 4 to 10 years
 Locomotor Ataxy
 1 to many years
 Lymphadenoma
 about 2 years
 Leucocythæmia
 $\frac{1}{2}$ to 7 years
 Morvan's Disease
 years
 Myelitis, Chronic
 $\frac{1}{2}$ to 10 years
 Nephritis, Chronic
 1 to 4 years
 Sclerosis, Disseminated
 5 to 10 years
 Yaws
 2 to 4 months or more

SLEEP

22. Day Restlessness

Azoturia
 Alcoholism, Chronic
 Dysentery
 Dyspnœa (725)
 Enteric (3rd week)
 Glossitis
 Hyperæmia of Brain
 Hydrophobia, 1.
 Laryngitis
 Myocarditis, Acute
 Meningitis, Simple, 1.
 Tapeworm
 Throat Affections

23. Sleeplessness

Collapse of Lungs
 Dysentery
 Delirium Tremens
 Dilatation of Heart
 (night)
 Dyspnœa (725)
 Flatulence
 Gout
 Gastritis, Chronic
 Hyperæmia of Brain
 Kidney, Cirrhosis of
 Mania
 Melancholia
 Meningitis, 1.
 Pneumonia, Acute
 Paralysis of Insane,
 General
 Stomach, Atony of

SLEEPLESSNESS—*continued*

- Trichinosis
- Valvular Disease
- 24. Night Terrors** (children)
- Dentition
- Frights
- Indigestion
- Lithæmia
- Mucous Disease
- Syphilis, Hereditary
- Worms
- 25. Nightmare and Starting**
- Dyspepsia
- Delirium Tremens
- Emboli, Small Cerebral
- Encephalitis, i.
- Hyperæmia of Brain
- Hypertrophy of Heart
- Meningitis
- Mental Exhaustion
- Teething
- Valvular Disease
- Worms
- 26. Drowsiness or Stupor**
- Anæmia (s)
- Atony of Stomach
after meals
- Abscess of Brain, i.
- Asphyxia
- Acute Yellow Atrophy
- Alcoholism, Acute, ii.

- Bromism
- Cerebellar Disease
- Chlorosis
- Concussion of Brain
- Dilatation of Heart(day)
- Dyspnœa (severe) (725)
- Encephalitis
- Embolism (clot)
- Embolism (fat)
- Epilepsy, ii.
- Gangrene of Lung
- Hæmatoma of Dura
Mater
- Hydrocephalus
- Hæmophilia (late)
- Jaundice (230)
- Intermittent Fever
end of paroxysm
- Intermittent, Pernicious
- Lithæmia
after meals
- Meningitis, Simple, ii.
- Meningitis, Tubercular,
ii.
- Meningitis, Cerebro-
spinal, ii.
- Narcotic poisoning
- Narcolepsy
- Neurasthenia
- Plague
- Remittent Fever(severe)
- Spina bifida (late)
- Softening of Brain
- Septicæmia (late)

DROWSINESS—continued

Typhus
Typhic state (143)
Uræmia
Winkel's Disease

27. Coma Vigil

The patient rouses when spoken to, but immediately lapses again into ~~coma~~

Commencing Coma (28)
Delirium Tremens
Enteric Fever (late)
Septicæmia
Typhic state (143)

28. Coma

Amyloid (late)
Asphyxia
Alcoholism, Acute
 subnormal temperature
Atrophy of Kidney,
 Acute
Atrophy, Acute Yellow
Apoplexy
Cholangitis, Chronic
 Fibrous
Compression of Brain
Coal-gas-poisoning
Diabetes (late)
Embolism of Brain
Encephalitis (late)
Exposure to Cold
Erysipelas, Severe
Fat Embolism
Fracture of Skull

Glanders (late)
Hæmatoma of Dura
 Mater
Hyperpyrexia
Jaundice (x)
Meningitis (late)
 simple, tubercular, or cere-
 bro-spinal
Myxœdema (late)
Narcotic poisoning
Pernicious Anæmia
 (term.)
Pernicious Intermittent
Remittent Fever
 (severe)
Scarlatina maligna
Sunstroke
Softening of Brain, Ex-
 tensive
Thrombosis of Brain
Tumours of Brain (late)
Uræmia
Variola maligna
Consciousness, Loss of
 (see 802)

APPETITE**29. Increased (Bulimia)**

Convalescence from
 Fevers
Chlorosis
Diabetes
Dilatation of
 Stomach (s)
Exophthalmic Goitre

BULIMIA—continued

Ergotism
Epilepsy
Gastritis, Chronic (s)
Hooping Cough
Iodism
Insanity
Neurasthenia (s)
Pregnancy
Ulcer of Stomach (s)
Worms (s)

30. Diminished (Anorexia)

Anæmia
Atrophy of Stomach
Ague (præm.)
Alcoholism, Chronic
Atony of Stomach
Anorexia nervosa
Abscess of Liver
Arsenic-poisoning
Cancer of Stomach or
Liver
Coryza
Constipation
Cirrhosis of Stomach
Cystitis
Duodenal Catarrh
Dysentery (late)
Delirium Tremens
Empyema
Fæcal Accumulation
Gastritis, Acute
Hepatitis, Acute
Influenza

Peritonitis, Chronic
Pyrexial Affections (see
831)

31. Morbid (Pica)

Anæmia
Chlorosis
Hysteria
Idiocy
Insanity
Pregnancy

THIRST

32. Increased

Ague
Arsenic-poisoning
Cholera
Cancer of Stomach
Diarrhœa
Diabetes
Diabetes Insipidus
Dilatation of Stomach
Gout
Glossitis
Gastritis, Acute and
Chronic
Hæmorrhage
Hysteria
Hyperidrosis
Intestinal Obstruction
Sunstroke
Tetanus
Vomiting
Pyrexial Diseases (see
831)

BOWELS**33. Constipation and Obstruction**

Ague
 Anæmia
 Atony of Bowel or Stomach
 Atrophy, Senile
 Ascites
 Acute Yellow Atrophy
 Appendicitis
 Abdominal Aneurysm
 Abdominal Tumours (881)
 Amenorrhœa
 Apoplexy, Spinal
 Cretinism
 Cancer of Bowel, Kidney, Pancreas, or Stomach
 Cirrhosis of Stomach
 Compression of Cord (slow)
 Concretions (see 607)
 Diabetes
 Dilatation of Colon, Congenital
 Duodenal Catarrh
 Dilatation of Stomach
 Erysipelas
 Enteric (1st week)
 Enteroptosis
 Fissure
 Gastritis

Gout
 Hæmorrhoids
 Hyperidrosis
 Hypertrophy of Pylorus
 Hernia, Strangulated
 Hysteria
 Intussusception
 Influenza
 Jaundice (see 230)
 Lithæmia
 Lead-poisoning
 Lactation, Prolonged
 Mucous Disease
 Meningitis
 Peritonitis
 Peritonæal Adhesions
 Prostate, Enlarged
 Pelvic Cellulitis
 Prolapsus Uteri
 Paraplegia
 Paralysis, Acute Ascending
 Paralysis of Diaphragm
 Prolapse at Sigmoid Flexure
 Retroflexion and Retroversion
 Stricture of Rectum or Bowel
 Scurvy
 Scybala
 Tumour of Brain
 Ulcer of Stomach
 Volvulus

34. Diarrhœa

Amyloid
 Addison's Disease
 Colitis, Ulcerative
 Cholera
 Cirrhosis of Liver (s)
 Cancer of Liver,
 Rectum, or Colon
 Dysentery
 Enteric Fever
 Empyæma
 Enteritis
 Endocarditis, Ulcerative
 Gastric Irritation
 Glanders, II.
 Gangrene of Lung
 Gastritis, Erythema-
 tous
 Hydrocephalus, Spuri-
 ous
 Hepatitis, Acute
 Kussmaul's Disease
 Locomotor Ataxy
 gastric crisis
 Lymphadenoma
 Leucocythæmia
 Metritis, Acute
 Pyæmia
 Puerperal Fever
 Ptomainism
 Poisoning by Arsenic
 Poisoning by Tartar
 Emetic
 Pancreatitis

Phthisis, II.

Rickets

Retained Scybala

Septicæmia

Sprue

Syphilitic Liver

Trichiniasis

Tuberculosis, Acute

Tabes mesenterica

Ulceration of Bowel

Uræmia

35. Flatulence

Abdominal Cancer and
 Tumours (see 886)

Cirrhosis of Liver

Constipation (see 33)

Dysentery

Dilatation of Stomach

Dyspepsia

Enteritis

Fæcal Accumulation

Gastritis

Hysteria

Hypochondriasis

Intestinal Obstruction

Jaundice (230)

Lithæmia

Mucous Disease

Tympanites (see 924)

**36. Tenesmus (Frequent
and fruitless strain-
ing)**

Calculus, Vesical

Concretions

TENESMUS—*continued*

Cancer of Rectum
 Dysentery
 Diarrhœa (late)
 Hæmorrhoids
 Intussusception
 Locomotor Ataxy
 rectal crisis
 Metritis, Acute
 Proctitis
 Prostatic Disease
 Poisoning by Arsenic,
 Cantharides, and
 other irritants
 Retroflexion
 *Scybala
 Worms

37. Painful Defæcation

Coccygodynia
 Cancer of Rectum or
 Uterus
 Condylomata
 Fissure
 Fistula
 Foreign Body
 *Hæmorrhoids, Inflamed
 Ischio-rectal Abscess
 Metritis, Acute
 Oöphoritis
 Pelvic Cellulitis or Peri-
 tonitis
 Periproctitis
 Prostatitis
 Prolapsus Ani

Salpingitis
 Sacro-iliac Disease
 Scybala, Impacted
 Ulcer of Rectum

38. Prolapsus Ani

Calculus, Vesical
 *Diarrhœa
 Hooping Cough
 Phimosi
 Scybala
 Vomiting
 Worms

39. Rectal Incontinence

Apoplexy
 Apoplexy, Spinal
 Cholera
 Chorea (severe)
 Cancer of Rectum, II.
 Coma (see 28)
 Compression of Cord
 Dysentery
 Diarrhœa (see 34)
 Epilepsy, II.
 Fissure of Anus (s)
 Fistula
 Hooping Cough (s)
 Myelitis
 Locomotor Ataxy (s)
 Paraplegia
 Paraplegia, Ataxic
 Paralysis
 Paralysis, Diphtheritic
 (s)

RECTAL INCONTINENCE— *continued*

Paralysis, General, of
Insane

Poisoning by Strych-
nine or Prussic Acid

Perinæum, Lacerated

Spinal Meningitis

Spinal Meningeal Hæ-
morrhage

Sunstroke

Shock

Tetanus

Typhic state (see 143)

Worms (s)

MENSTRUATION

40. Amenorrhœa (Menses absent)

*Anæmia

Atrophy of Uterus

Acromegaly, II.

Absence of Uterus,
Ovaries, or Vagina

Cretinism

Cancerous cachexia

Chlorosis

Cervical Catarrh

Diabetes

Endometritis

Ectopic Gestation

Exophthalmic Goutre

Fibroids

Hysteria

Imperforate Hymen

Imperforate Os

Leucocythæmia

Melancholia

Mercurialism

Malarial cachexia

Metritis

Menopause

Nephritis

Oöphoritis

Ovarian Cysts

Pelvic Adhesions

Parametritis

Phthisis

Pregnancy

Renal insufficiency

Superinvolution

Ulcer of Stomach

The menses are also absent
sometimes owing to
change of air or of occupa-
tion, to frights, and to in-
tellectual strain or worry

41. Dysmenorrhœa (Pain- ful menstruation)

Anæmia

Anteflexion

Chlorosis (x)

Cancer

Congestion

Deflection of Canal

Endometritis

Ectopic Gestation

shreds or decidua vera

Fibroids

Gout

Hypertrophy of Uterus

DYSMENORRHŒA—*continued*

Neuralgia
Neurosis
Obstruction
 from clots, shreds, membranes, etc.
Oöphoritis
Polypus
Retroflexion
Rheumatism
Stricture of Canal

42. Menorrhagia (Excessive periodic flow)
and

43. Metrorrhagia (Intermediate Hæmorrhage)

Abortion
Abraded Os
Alcoholism
Anteflexion
Adenoma interna
Cirrhosis of Liver
Congestion of Uterus
Cancer of Uterus
Chlorosis (x)
Ectopic Gestation
Endometritis
Emmenagogues
Fibroids
Fungous Degeneration
Granular Os
Hæmatocele
Heart Disease

Hypertrophy
Hæmophilia
Inversion
Leucocythæmia
Lead-poisoning
Menopause
Miscarriage
Metritis (x)
Myxœdema
Nephritis
Oöphoritis
Ovaries, Displaced
Purpura
Phosphorus-poisoning
Prolapsus Uteri
Polypus
Pelvic Cellulitis
Pelvic Peritonitis
Plethora
Retained Decidua
Retroflexion
Sarcoma
Scurvy
Subinvolution
Salpingitis
Variola, Malignant
Yellow Atrophy, Acute

44. Shreds and Membranes

Abortion
Ectopic Gestation
Membranous Dysmenorrhœa
Miscarriage
Puerperal Decidua

DISCHARGES

45. Leucorrhœa

Anæmia
Anteflexion (x)
*Cervical Catarrh
Chronic Endometritis
Fibroid
Granular Cervix
Gonorrhœa
Hypertrophied Cervix
Metritis, Chronic
Prolapsus Uteri
Polypus
Pelvic Peritonitis
Salpingitis
Sarcoma of Uterus
Tubal Colic
intermittent
Worms (children)

46. Sanguineo-purulent Discharge

Cancer of Uterus
Fibroid Polypus
Hæmorrhagic Endo-
metritis
Purulent Endometritis
Septic Endometritis
Metritis, Acute
Pelvic Abscess
discharging

47. Offensive Discharge

Cancer of Uterus
Death of Fœtus

Endometritis, Septic
Endometritis, Chronic
(slightly so)
Polypus, Cervical
Puerperal state
(moderately so)
Retained Decidua
Tubercle of Uterus

48. Urethral Discharge

Catarrh
Chancre in Urethra
Foreign Body
Gleet
*Gonorrhœa
Prostatitis
Urethritis

49. Spermatorrhœa

Locomotor Ataxy
Masturbation
Neurasthenia
Venereal Excess

*** Normal at intervals in celi-
bates

PAIN

HEADACHE

50. Frontal

Anæmia
Adenoids
Asthenopia, Muscular
Frontal Sinus Obstruc-
tion
Glaucoma
Gastritis

HEADACHE—*continued*

Hæmatoma of Dura
Mater
Iritis
Lithæmia
Periostitis
Presbyopia (commencing)
Syphilitic Nodes
Trigeminal Neuralgia
Uræmia (see 53)

51. Occipital

Buhl's Disease
Cervico-occipital Neuralgia
Cerebro-spinal Meningitis
Constipation
Cirrhosis of Kidney
Cerebellar Tumour
Naso-pharyngeal Disease
Neurasthenia
Pharyngitis
Rheumatism
*Syphilis

52. Unilateral

Dysmenorrhœa
Gouty state
Hysteria (s. clavus)
Migraine
Otitis media
Trigeminal Neuralgia
Wax in Meatus

53. Unclassified

Ague
Alcoholism
Anæmia
Apoplexy (præm.)
Arsenic-poisoning
Abscess of Brain
Amenorrhœa
Atony of Stomach
Asthma
Aura epileptica
Coryza
Catalepsy
Constipation
Cinchonism
Compression of Brain
Congestion of Liver
Chlorosis (vertex)
Cirrhosis of Kidney
Dilatation of Stomach
Duodenal Catarrh
Dysmenorrhœa
Dengué
Dyspnœa (725)
Encephalitis
Epilepsy
Erysipelas
Exophthalmic Goitre
Gouty state
Glaucoma
Glandular Fever
Hæmatoma of Dura
Mater
circumscribed

HEADACHE—continued

Hyperæmia of Brain
 Hereditary Cerebellar
 Ataxy
 Hypertrophy of Brain
 Hypertrophy of Heart
 Hysteria
 Hay Fever
 Hydrocephalus
 Hæmorrhage
 Influenza
 Iritis
 Incubation of Fevers
 Lithæmia
 Leucorrhœa
 Lactation, Prolonged
 Meningitis
 Meningitis, Cerebro-
 spinal
 Measles
 Menopause
 Neuralgia
 Neurasthenia
 Nephritis
 Oxaluria
 Oöphoritis
 Plague
 Pneumonia, Acute
 Pachymeningitis
 Polypus, Nasal
 Pyrexia (831)
 Remittent Fever
 Rheumatism
 Relapsing Fever

Sunstroke
 Softening of Brain
 Syphilis (crushing)
 Tumour of Brain
 Thrombosis, Cerebral
 Tension, High Arterial
 Tapeworm
 Typhus
 Uræmia
 Variola, 1.
 Valvular Disease
 Weil's Disease

Headache is often caused
 by impure air, fatigue,
 flatulence, depression
 after excitement, and by
 weight of hair

54. Eyeballs

Asthenopia
 Coryza
 Conjunctivitis
 Glaucoma
 Iritis
 Injuries
 Keratitis
 Neuralgia of Fifth Nerve
 Ophthalmoplegia in-
 terna
 Panophthalmia (see
 Photophobia, 155)

55. Ear

Aneurysm of Innomi-
 nate
 Abscess, Mastoid, etc.
 Caries of Temporal Bone

EAR—continued

Foreign Body in Meatus
Injuries
Neuralgia
Otitis media or interna
Polypus
Teething

56. Upper Jaw

Abscess
Antrum, Disease of
Caries
Cancer
*Dental Affections
Neuralgia
Periostitis

57. Lower Jaw

*Abscess
Actinomycosis
Caries
Dental Affections
Mumps
Neuralgia

58. Neck

Abscess
Caries, Cervical
Glandular Fever
Innominate Aneurysm
Lymphadenoma
Polymyositis
*Rheumatism
Serratus Palsy
Strain

59. Nucha (Nape of neck)

Cervico-occipital Neur-
algia
Cerebro-spinal Menin-
gitis
Pharyngitis
*Rheumatism
Spinal Meningeal Hæ-
morrhage
Tetanus

60. Throat

Cancer
Crico-arytenoid Arth-
ritis
Concretions in Tonsil
Diphtheria
Foreign Body
Laryngitis
Naso-pharyngeal
Catarrh
Pharyngitis
Post-Pharyngeal
Abscess
Poisoning by—
Aconite
Cantharides
Conium
Irritants
Corrosives
Quinsy
Scarlatina
*Tonsillitis
Tubercular Pharyngitis
Tubercular Tonsillitis

THROAT—continued

Uvula, Swollen
(See *Dysphagia*, 170)

BACK**61. Spinal**

Aneurysm, Abdominal
Aneurysm of Descending Aorta
Apoplexy, Spinal
 circumscribed
Caries of Vertebrae
Cancer of Liver
Compression of Cord
Cerebro-spinal Meningitis
External Spinal Pachymeningitis
Hyperæmia of Cord
Hysteria
Internal Spinal Meningitis
Mollities Ossium
Myelitis
Neuralgia
Neurasthenia
Syringomyelia
Spinal Meningeal Hæmorrhage
Spinal Irritation
Tubercular Spinal Meningitis
Tumour of Cord
Ulcer of Stomach
 lumbo-dorsal

62. Coccygeal

Coccygodynia
Fissure of Anus
Fistula
*Hæmorrhoids
Injuries
Periproctitis
Rheumatism
Uterine Diseases

63. Sacral

Ataxic Paraplegia
Cancer of Rectum or Uterus
Cervical Catarrh
Dysmenorrhœa
Endometritis
Flexions of Uterus
Fibroids
Inversion of Uterus
Metritis
Prolapsus Uteri
Pelvic Cellulitis
Pelvic Peritonitis
Retroversion
Sarcoma of Uterus
Spinal Apoplexy
Subinvolution
Sacro-iliac Disease
Tumours of Uterus

64. Lumbar

Abdominal Aneurysm
Appendicitis
Azoturia

BACK—*continued*

Abscess, Lumbar
 Abscess in Walls of
 Rectum
 Chyluria
 Calculus, Renal
 unilateral
 Calculus, Vesical
 Chorea
 Cystitis
 Dengué
 Dysmenorrhœa
 Embolism, Renal
 Flatulence
 Fæcal Accumulation
 Gravel
 Hernia
 Hydatids
 Hydronephrosis
 Infantile Paralysis (on-
 set)
 Influenza
 Kidney, Floating
 Lithæmia
 *Lumbago
 Miscarriage
 Meningitis, Internal
 Spinal
 Meningitis, Tubercular
 Spinal
 Nephralgia
 Nephritis, Acute
 Nephritis, Suppurating
 Neuralgia, Lumbo-
 abdominal

Parturition
 Pachymeningitis, Ex-
 ternal Spinal
 Perinephritis
 Pyonephrosis
 Pyelitis
 Pleurisy (onset)
 Parasite of Kidney
 Remittent Fever
 Tumour, Abdominal
 Variola, i.

65. Interscapular

Aneurysm of Descend-
 ing Aorta
 Atony of Stomach
 Cirrhosis of Stomach
 Caries of Spine
 *Flatulence
 Gastric Ulcer
 Gastritis
 Gastric Irritation

66. CHEST

67. Mamma

Abscess
 Cracked Nipple
 Cancer
 Cyst
 Ectopic Gestation
 Hysteria
 Menstruation (s)
 Obstructed Lacteal Duct
 Ovarian Disease
 Pregnancy

CHEST—*continued***68. Sternum**

Aortitis
 Aneurysm
 Angina Pectoris
 Bronchial Glands, En-
 larged
 Bronchitis, Acute, i.
 Caries of Sternum or
 Spine
 Gastric Irritation
 Influenza
 Locomotor Ataxy
 Spinal Apoplexy

69. Præcordial

This is often hyperæsthesia

Anæmia
 Angina Pectoris
 Aneurysm of Heart
 Arsenic-poisoning
 Beri-beri
 Endocarditis
 Epilepsy
 Flatulence
 Fibroid Disease of Heart
 Functional Heart Dis-
 order
 Gastritis
 Gout
 Gastralgia
 Heartburn
 Hysteria
 Myocarditis
 Pericarditis

Thrombosis of Pulmon-
 ary Artery

Valvular Disease
 especially aortic

70. Side

Aneurysm
 Fæcal Accumulation
 Flatulence
 Herpes zoster
 usually on right side
 Hysteria
 Intercostal Rheumatism
 (Pleurodynia)
 Intercostal Neuralgia
 u. 6th to 9th rib

Pneumonia, Acute

Pleura, Cancer of

*Pleurisy, Acute, i.

Ribs, Carious

Ribs, Fractured

Woillez's Disease

71. Right Hypochondrium

Cancer of Liver

Cancer of Stomach or
 Pylorus

Cancer of Pancreas

Cancer of Duodenum

Cancer of Colon

Cholecystitis

Constricted Liver

Cyanotic Liver

Cirrhosis of Liver

'Empyæma' of Gall-
 Bladder

*Gallstones

RIGHT HYPOCHONDRIUM—*continued*

Hepatitis, Acute
 Hepatic Abscess
 Hydatids, Inflamed
 Kussmaul's Disease
 Perihepatitis
 Peritonitis
 Pleurisy
 Pneumonia (s)
 Syphilitic Liver

72. Left Hypochondrium

Cancer of Stomach
 Colitis
 *Fæcal Accumulation
 Peritonitis
 Splenitis
 Splenic Infarct
 Ulcer of Stomach

73. Unclassified Chest Pain

Aneurysm
 Abscess, Mediastinal
 Atony of Stomach
 Cancer of Lung
 Dissecting Aneurysm
 *Dyspepsia
 Mollities Ossium
 Phthisis, Acute
 Pneumothorax (onset)
 Pulmonary Embolism
 sudden
 Rheumatism
 Syphilitic Periostitis
 Tumour of Mediastinum

74. ABDOMEN**75. Epigastrium**

Addison's Disease
 Atony of Stomach
 Arsenic-poisoning
 Acute Yellow Atrophy
 Caries of Spine
 Cholera, Asiatic
 Cancer of Stomach
 Cancer of Pylorus
 Cancer of Pancreas
 Cirrhosis of Stomach
 Dilatation of Stomach
 Distended Trans. Colon
 Enteroptosis

***Gastric Irritation**

Gastralgia
 relieved by food
 Gastritis, Acute Ery-
 thematous

Gastritis, Chronic
 Gallstones

'Gout of Stomach'

Hyperchlorhydria

3 to 4 hours after a meal,
 continued till the next
 meal

Irritant-poisoning

Pericarditis (s)

Pancreatitis

Strain of Recti Muscles
 from coughing or vomiting

Ulcer of Stomach (cir-
 cumscribed)

u. $\frac{1}{4}$ hour after food

ABDOMEN—*continued*

Ulcer of Duodenum
2 hours after food

76. Umbilicus

Gallstones

Gastric Ulcer

u. above and to right of
navel

Hernia

Omental Cancer

77. Hypogastrium and Pelvis

Amenorrhœa

Bladder, Distended

Bladder, Ulcer of

Bladder, Cancer of

*Cystitis

Calculus

Chyluria

Cancer of Uterus

Dysmenorrhœa

Endometritis, Chronic

Endometritis, Septic

Endometritis, Hæmor-
rhagic

Endometritis, Gonor-
rhœal

Fibroid of Uterus

Hypertrophy of Uterus

Inversion of Uterus

Metritis, Acute

Mollities Ossium

Neuralgia of Bladder

Neuralgia of Uterus

Oöphoritis

Pelvic Peritonitis

Pelvic Hæmatocele

Pelvic Abscess

Pericystitis

Prolapsus Uteri

Retroversion

Salpingitis

Subinvolution

Tubal Colic

Tubal Fœtation

Ulcer of Bladder

78. Right Iliac

Appendicitis

Enteric Fever

Loaded Cæcum

79. UNCLASSIFIED

Abdominal Aneurysm

Colic

Colitis

Cancer

Cholera

Diarrhœa

Dysentery

Dyspepsia

Enteritis

Enteroptosis

Ectopic Gestation

Foreign Body

Fæcal Accumulation

Gastralgia

Glandular Fever

Gallstones

Hysteria

UNCLASSIFIED—*continued*

Hernia
 Hydronephrosis (when large)
 Intestinal Concretion
 Intussusception
 Ileus
 Irritant-poisoning
 Intestinal Obstruction
 Influenza (gastric form)
 Leucocythæmia
 Lead Colic
 Locomotor Ataxy
 gastric crisis
 Mucous Disease
 Myalgia
 Neuralgia, Lumbo-abdominal
 Neurasthenia
 Ovarian Cyst
 Ptomainism
 Pancreatic Disease
 Peritonitis
 Perforation
 Pleurisy, Incipient (s)
 Rheumatism
 Tabes mesenterica
 Ulcer of Intestine
 HYPOCHONDRIA (see *Chest*, 71)

80. PERINÆUM

Abscess, Ischio-rectal
 Abscess, Perinæal

Abscess, Prostatic
 Cancer of Bladder or Prostate
 Calculus
 Cystitis
 Extravasation of Urine
 Fistula
 Fissure of Anus
 Hæmorrhoids
 Locomotor Ataxy
 rectal crisis
 *Prostatitis (see *Painful Defæcation*, 37)

81. PENIS

Calculus, Vesical
 *Gravel
 Neuralgia
 Renal Colic
 Venery, Excessive (see *Painful Micturition*, 521)

82. TESTICLE

Abdominal Aneurysm
 Abdominal Tumour
 Calculus, Vesical
 Cancer
 *Epididymitis
 Hernia
 Injury
 Neuralgia
 Orchitis
 Tubercular Testis
 Varicocele
 Venery, Excessive

83. LIMBS (see *Unclassified List*, 91)**84. Shoulder**

Angina Pectoris
 Atony of Stomach
 Aneurysm of Innominate
 Cancer of Liver (angle
 of right scapula)
 Cervico-brachial Neur-
 algia
 Duodenal Catarrh
 Diaphragmatic Pleurisy
 Dental Caries (s)
 Hepatic Colic (rt)
 Hepatitis, Acute
 Hepatic Congestion
 Pleurisy, Acute (s)
 *Rheumatism
 Serratus Palsy
 Synovitis (see *Joints*, 92)

85. Arm

Angina Pectoris (u. left)
 Atonic Dyspepsia
 Amyotrophic Lat. Scler-
 osis
 Brachial Neuritis
 Cervico-brachial Neur-
 algia
 Morvan's Disease
 *Rheumatism
 Valvular Disease (s)
 (see *Limbs*, 91)

86. Hand

Gout

Occupation Neurosis

Rheumatism

Rheumatoid Arthritis

Teno-Synovitis

Surgical Affections

87. Thigh

Aneurysm, Abdominal
 (Radiating)
 Aneurysm, Femoral or
 Poplitæal
 Barlow's Disease
 Dysmenorrhœa
 Hysteria
 Impacted Fæces
 Metritis
 Neuralgia, Antr. Crural
 Neuroma
 Ovarian Cyst
 Pregnancy
 Pelvic Cellulitis
 Pelvic Tumours
 Perimetritis
 *Sciatica
 Sacral Glands (enlarged)
 Vesical Calculus (see
Limbs, 91)

88. Leg

Crural Neuralgia
 inner side to toe
 Friedreich's Disease
 Leucocythæmia
 Osteomyelitis
 Periostitis

LEG—*continued*

Phlegmasia alba Dolens

Phlebitis

Primary Spastic Paraplegia

*Rheumatism

Tubercular Bone (see *Limbs*, 91)

89. Foot

Corns, etc.

Flat Foot

Gout

Metatarsalgia

*Rheumatism

Tubercular Bones

Surgical Diseases

90. Myalgia

Alcoholism

Anæmia

Biliary Congestion

Coryza

Cholera

Cerebro-spinal Meningitis

Duodenal Catarrh

Enteric Fever

Invasion Stage of Exanthemata and Visceral Inflammations

Illness, Acute (convalescence)

Influenza

Locomotor Ataxy

*Muscular Rheumatism

Occupation Neurosis

Psittacosis

Polymyositis

Rheumatic Fever (early)

Relapsing Fever

Septicæmia

Scurvy

Syphilis

Sprain

Trichinosis

Tubercular Meningitis, i.

Weil's Disease (calves)

91. Limbs (Unclassified)

Appendicitis

Ague (præm.)

Abdominal Tumours

Beri-beri

Compression of Cord

Cancer of Rectum
simulating sciatica

Cancer of Bone

Dengué

Exostosis

Erythromelalgia (of the
swellings)General Paralysis
(early)

Glanders

Hæmophilia

Impacted Embolism

Influenza

Locomotor Ataxy

'lightning' or rheumatoid

LIMBS—continued

Lipomatosis neurotica
 in the fatty patches
 Lead-poisoning
 Meralgia paresthetica
 (thigh)
 Myelitis
 Mollities Ossium
 Multiple Neuritis
 Oöphoritis
 Osteitis
 Plague
 Periostitis
 Progressive Muscular
 Atrophy
 *Rheumatism
 Rickets
 Remittent Fever
 Spinal Meningitis
 Spinal Apoplexy
 Softening, Chronic
 Thrombosis
 Tetanus
 Trichinosis
 Tubercular Bone
 Urticaria

92. JOINTS

Compression of Cord
 Coxa vara
 sometimes begins in knee
 Chorea (s)
 Gout
 Glanders

'Growth Fever' (epi-
physes)

Hip Disease, I. (knee)

Infantile Paralysis
 (onset)

Injuries

Lead-poisoning

Loose Cartilage

Locomotor Ataxy

Myelitis, Acute

Neuralgia

Peliosis rheumatica

Pyæmia

Rheumatoid Arthritis

Rheumatism, Acute

*Rheumatism, Chronic

Recklinghausen's Dis-
 ease

Synovitis

Syringomyelia

Scurvy

Tubercular Disease
 (late)

93. CHARACTER

The personal equation
 must be allowed for

94. Sharp

Angina Pectoris

Appendicitis

Dissecting Aneurysm

Ectopic Gestation

Gout

Pleurisy, Acute

Pneumothorax (onset)

SHARP—continued

Spinal Meningeal
Hæmorrhage
Acute Inflammation of
Serosus or Synovial
Membranes in general
(See *Paroxysmal*, 96)

95. Dull

Chronic Inflammation
of Serosus Mem-
branes. Inflammation
of Mucous Mem-
branes and of Visceral
Parenchyma

96. Paroxysmal

Angina Pectoris
Aneurysm
Appendicitis (s)
Colic (relieved by press-
ure)
Cancer of Pancreas
Calculus of Pancreas
Cerebral Tumours
Clot in Ureter
Distended Bladder
Dysentery
Dysmenorrhœa
Floating Kidney
Hydatids of Kidney
daughter cysts in ureter
Hepatic Colic
Lead Colic
Lumbrici
Locomotor Ataxy
nephralgic or other crisis

Mercurialism
Neuralgia (esp. Tic)
Parturition
Renal Calculus
Sporadic Cholera
Scybala or Concretions
Strangulated Hernia
Tubercular Synovitis
Tubal Colic
Vesical Calculus
Urethral Calculus
Uterine Fibroids
Uterine Polypus

97. Radiating

Acute Aortitis
arm
Angina Pectoris
left arm and shoulder
Aneurysm of Asc. Aorta
back, shoulders, and arms
Abdominal Aneurysm
back, false ribs, groin, and
testes
Aneurysm of Innomi-
nate
right shoulder
Atony of Stomach
shoulder
Caries of Spine
sternum, epigastrium, or
abdomen
Compression of Cord
Gastritis, Acute Ery-
thematous
shoulder and left arm

RADIATING—*continued*

Hepatic Colic

umbilicus

Hip Disease

knee

Neuralgia

nerve-terminations

Oöphoritis

back and limbs

Pancreatic Calculus

to left

Pelvic Abscess

thighs

Pachymeningitis, Ext.

Spinal

Renal Calculus

thigh and testicle

Rectum, Cancer of

limbs

Spinal Tumour

nerve-endings

Spinal Meningeal

Hæmorrhage

nerve-endings

Spinal Meningitis,

Intl.

Uterine Fibroids

genitals and legs

Vesical Calculus

meatus urinarius and testicle

98. Shifting

*Flatulence

Hysteria

Locomotor Ataxy

Rheumatism

Spinal Tumour

Tapeworm

Trichinosis

99. Gnawing

Abdominal Aneurysm

back

Caries of Spine

Cancer of Stomach

Descending Thoracic

Aneurysm

Gout

Lithæmia (lumbar)

Periostitis

Spinal Meningitis

100. Increased by Movement

Acute Inflammatory

Diseases

Abscess

Caries of Spine

Fractures

Gout

Glandular Fever

Lumbago

Neuritis

Oöphoritis

Pachymeningitis, Ext.

Spinal

Perinephritis

Pleurisy, Acute

Pneumonia, Acute

Peritonitis

Pleurodynia

Rheumatism, Acute

Rheumatism, Muscular

INCREASED—continued

Sciatica
 Spinal Meningitis
 Spinal Irritation
 Synovitis
 Spinal Tumour
 Salpingitis
 Weil's Disease

101. Increased at Night

Most pain is so, but especially that from—

Locomotor Ataxy
 Neuritis
 Osteitis
 Periostitis
 Renal Calculus
 Rheumatism

SENSATION**102. TENDERNESSE**

The pain of all inflammatory affections is accompanied by more or less tenderness

103. Scalp

Cervico-occipital Neuralgia
 Clavus Hystericus
 Cerebral Tumour
 over site
 Erysipelas
 Migraine
 Mastoid Abscess
 Rheumatism
 Syphilitic Periostitis
 Trigeminal Neuralgia

104. Spine

Abdominal Aneurysm
 Caries of Spine
 Compression of Cord
 Descending Thoracic Aneurysm
 Enlarged Bronchial Glands
 4th and 5th dorsal
 Hysteria
 Myelitis, Chronic
 not increased by movement
 Meningitis, Cerebro-spinal
 Meningitis, Spinal
 'Spinal Irritation'
 Spinal Apoplexy
 Spinal Periostitis
 Tumours of Spine

105. Lumbar

Appendicitis (right side)
 Lumbar Abscess
 Nephritis, Acute
 Nephritis, Suppurative
 Perinephritis
 Renal Calculus
 Renal Cancer

106. Chest

Angina Pectoris
 Aneurysmal Prominence
 Caries of Sternum
 Empyæma necessitatis

TENDERNESS—continued

Hysteria (Mamma)
 Intercostal Neuralgia
 Myocarditis
 Periostitis
 Phthisis (on percussion)
 Pericarditis

HYPOCHONDRIUM

**107. Right, including Liver
 Tenderness**

Acute Yellow Atrophy
 Abscess of Liver
 Cancer of Liver
 Cirrhosis of Liver
 (Hypertrophic)

***Cyanotic Liver**

Fatty Degeneration of
 Liver

Fatty Degeneration of
 Heart

Gallstones

Hydatids, Inflamed

Hepatitis, Acute

Jaundice, Obstructive

Myocarditis

Mitral Disease

Perihepatitis

Sarcoma of Liver

Syphilitic Liver

Weil's Disease

**108. Left, including Splenic
 Tenderness**

Ague

Enteric Fever

Influenza

Impacted Fæces (angle
 of colon)

Relapsing Fever

ABDOMEN

109. Epigastrium

Addison's Disease

Arsenic-poisoning

Acute Yellow Atrophy

Cancer of Stomach
 (slight)

Cirrhosis of Stomach

Gastritis, Acute Erythe-
 matous

Gastritis, Chronic

Gallstones

Hysteria

Hypochondriasis

Irritant-poisoning

Pericarditis, Acute

Pleurisy, Diaphragm-
 atic

Pancreas, Inflammation
 of

***Ulcer of Stomach**

acute, small circumscribed
 area. Similar area in
 back

110. Iliac

Appendicitis (rt.)

Enteric Fever

right side—gurgling

Hysteria

Oöphoritis

Pelvic Cellulitis

ABDOMEN—*continued*

Pelvic Peritonitis

Sacro-iliac Disease

Salpingitis

Uterine Congestion

111. McBurney's Point

This lies midway between
the anterior superior
spine of the right ilium
and the umbilicus

Appendicitis

point of maximum in-
tensity

112. Hypogastrium

Calculus, Vesical

*Cystitis

Dysmenorrhœa

Metritis, Acute

Pelvic Peritonitis

Pericystitis

Perimetritis

**113. Unclassified Abdo-
minal Tenderness**

Cancer of Intestine

Dysentery

Dysmenorrhœa

Diaphragmatic Pleurisy

Peritonitis, Acute

Strangulated Hernia

unless gangrenous

Sequela of Colic

Ulceration of Intestine

114. Limbs

Barlow's Disease

lower end of each thigh

Erythema nodosum

'Growth Fever'

Hip Disease

on tapping trochanter

Leucocythæmia

Neuritis

Neuritis, Multiple

Osteitis

Periostitis

Polymyositis

Phlegmasia Alba Dolens

usually left leg

Phlebitis

along a hard vein

Rickets, I.

Spinal Meningitis, Int.

Scurvy

Tetanus

Trichinosis

115. Joints

Gout

Hysteria

Pyæmia

Rheumatism, Acute

Rheumatoid Arthritis

Synovitis

116. Perinæum

Abscess, Ischio-rectal

Abscess, Urethral

*Prostatitis

117. Points Douloureux

rare in first attacks



POINTS DOULOUREUX—

continued

Cervico-brachial Neuralgia

axilla, upper part of deltoid, bend of elbow, behind inner condyle

Lumbo-abdominal Neuralgia

spinous processes, mid crest of ilium, hypogastrium, groin, scrotum

Intercostal Neuralgia

spinous process, side of chest or abdomen, and a point just short of the mesial line

Sciatica

posterior iliac spine, sciatic notch, behind knee, head of fibula, behind external malleolus, back of foot

Fifth Nerve (Trigeminal Neuralgia)

1st division.—Supra orbital notch, above parietal eminence, and junction of nasal bone with nasal cartilage

2nd division.—Infraorbital foramen, malar bone, gum of upper jaw

3rd division.—Temple, in front of ear, mental foramen and side of tongue (see 111)

118. Muscular Anæsthesia

Coarse Disease of Cerebrum

Hysteria (s)

Locomotor Ataxy

Multiple Neuritis
Syringomyelia

119. Hyperæsthesia (Exaggerated sensation)

This can usually be distinguished from tenderness by the skin being unduly sensitive after it has been raised from the subjacent tissues

Acute Bronchitis
sternal

Barlow's Disease
legs and knees

Clavus hystericus

Compression of Cord, i.

Encephalitis

Hyperæmia of Brain

*Hysteria

Injuries of Nerves
especially gunshot wounds

Myelitis, Acute

Neuritis, i.

Neuralgia
esp. trigeminal

Meningitis Simplex

Meningitis, Cerebro-spinal

Meningitis, Int. Spinal

Meningitis, Tubercular
Spinal

Pregnancy

Pachymeningitis, Ext.
Spinal, i.

Spinal Meningeal Hæmorrhage

**HYPERÆSTHESIA—con-
tinued**

‘Spinal Irritation’
Spinal Concussion
Tumours of Brain

**120. Anæsthesia (Absence
of common sensation)**

Ague (cold stage)
fingers
Aneurysm of Desc. Aorta
3rd and 4th interspaces
Apoplexy
paralysed side, unless pons
or medulla be the seat
Apoplexy, Spinal
lower extremities
Anterior Crural Para-
lysis
thigh, inner side of leg
and foot
Compression of Cord, II.
Caisson Disease
Catalepsy (if severe)
Chorea
Cerebral Hyperæmia
Cerebral Tumours
esp. of pons
Cerebro-spinal Menin-
gitis (late)
Concussion of Spine
Compression of Cord,
Slow
Diphtheritic Paralysis
Disseminated Sclerosis
Embolism

Exposure to Cold
Friedreich's Disease
legs
General Paralysis of
Insane
*Hysteria
Hypertrophy of Brain
Hæmorrhage into Spi-
nal Arachnoid
Herpes zoster
between vesicles
Locomotor Ataxy
glans penis and soles of feet
Lead-poisoning
Lepra anæsthetica
Morvan's Disease
Myelitis, Acute, II.
Myelitis, Chronic
Meningitis Simplex
Meningitis, Spinal (late)
Neuritis
Neuroma
Pressure on Nerve-
trunk
Sciatica
Softening, Chronic (s)
Spinal Pachymeningitis
Ext. II.
Syringomyelia
arms and chest
Transverse Softening of
Cord
lower extremities
Tumours of Cord
Tetany

ANÆSTHESIA—*continued*

Typhic state, 143

Thrombosis

Unilateral Lesion of
Cord

if dorsal region, one leg

(See *Loss of Consciousness*, 802, and *Numbness*, 126)

121. Hemianæsthesia (Sensation absent on one side)

Apoplexy (x)

Cerebellar Disease
s. of opposite side

Hemichorea

Hysteria

u. of left side

Paralysis of 5th Nerve

Thrombosis or Rupture
of Posterior Cerebral
Artery

Tumour of Brain

posterior part of internal
capsule

Unilateral Lesion of
Cord

upper cervical

Unilateral Atrophy of
Brain

122. Analgesia (Insensibility to pain)

Catalepsy, Severe

Diphtheritic Paralysis

General Paralysis of
Insane

Hysteria

often hemianalgesia

Hystero-epilepsy

Locomotor Ataxy

Syringomyelia

Transverse Softening of
Cord.

**123. THERMÆSTHESIA
(Sense of temperature)**

124. Lost or diminished

Lepra anæsthetica

Locomotor Ataxy

Syringomyelia

Transverse Softening of
Cord

125. Increased

Degeneration of Cere-
bral Ganglia

Neuritis

126. Numbness

Appendicitis

right leg—early

Acroparæsthesia

fingers, toes, lips, and tongue

Aura epileptica

Apoplexy (præm.)

Apoplexy, Spinal

Aconite-poisoning

Beri-beri

Bromism

*Circulation, Defective

Hysteria

Hysterical Œdema

NUMBNESS—*continued*

Hyperæmia, Spinal
 Leprosy
 Locomotor Ataxy (soles)
 Myxœdema
 Myelitis, Acute
 Neuritis
 Neuroma (x)
 Neuralgia (præm.)
 Recklinghausen's Disease
 Spinal Tumour
 Sciatica
 Softening, Chronic
 Syringomyelia
 Tetany

127. Itching, Formication,
or Tingling

Apoplexy (præm.)
 Aura epileptica
 Anæmia of Brain
 Arsenic-poisoning
 Cheiropompholyx
 Chloasma
 Copalibism
 Dermatitis
 Disseminated Sclerosis
 Desquamation
 Diabetes (genitals)
 Dysidrosis
 Ergotism
 Encephalitis
 Eczema
 Fæcal Accumulation

Gout
 Hydroa
 Hyperæmia of Brain
 Hyperæmia, Spinal
 Hæmorrhoids
 Hysteria
 Hypertrophy of Heart
 Irritating Clothing
 Irregularity of Circulation
 Jaundice
 Lichen
 Leucorrhœa
 Locomotor Ataxy
 Meralgia paræsthetica
 (thigh)
 Myelitis
 Meningeal Hæmorrhage, Spinal
 Menopause (Pruritus vulvæ)
 Nephritis
 Pediculi, etc.
 Phthiriasis
 Pruritus
 Prurigo
 Pityriasis
 Psoriasis, i.
 Pemphigus (x)
 Pressure on a Nerve
 Scabies
 Spinal Hyperæmia
 Spinal Irritation
 Spinal Meningitis

ITCHING—*continued*

Spinal Apoplexy
Scleroderma
Stings
Sciatica
Tetany
Tumours of Brain
Tumours of Spinal Cord
Urticaria
Uterine Disease
Variola
Worms (mucous orifices)

128. Præcordial Anxiety or Sinking

Aneurysm
Aortitis
Arsenic-poisoning
Asthenia in general
Angina Pectoris
Atony of Stomach
Cholera
Dilatation of Heart
Displacement of Heart
Flatulence
Heart Lesions in general
Lithæmia
Melancholia
Myocarditis, Acute
Pericarditis
Syphilitic Heart

129. Heartburn (Cardialgia)

Due to lactic acid

Cancer of Stomach
Dilatation of Stomach
Gastralgia
Gastritis
Indigestion
 esp. of fatty food
Ulcer of Stomach

130. Fear of Open Spaces
Agoraphobia

131. Girdle Sensation
Ataxic Paraplegia
Crushing Lesion of Cord
Locomotor Ataxy
Myelitis
Paraplegia
Spinal Meningitis
Sprained Diaphragm
 from vomiting, etc.
Tumours of Cord

132. Subjective Heat
Exophthalmic Goitre
Irritant-poisoning
Influenza
Locomotor Ataxy
Menopause
Paralysis agitans
 epigastrium and back
Rectum, Cancer of
Spinal Irritation
 back

Cold (see *Chills*, 147)

133. Fulness

Atony of Stomach
Dilatation of Stomach

FULNESS—continued

Emphysæma
 Fatty Degeneration of Heart
 Gastric Irritation
 Gastritis, Chronic
 Goitre, Exophthalmic
 Hypertrophy of Heart
 Hepatic Enlargements
 Peritonitis, Chronic
 Remittent Fever

134. Weight

Aura epileptica
 Atony of Stomach
 Apoplexy (præm.)
 Dyspepsia
 Dilatation of Stomach
 Dilatation of Heart
 Displacement of Heart
 Endocarditis, Acute
 Flatulence
 Gastric Irritation
 Gastritis, Chronic
 Hæmatemesis (præm.)
 Hæmoptysis (præm.)
 sternum
 Hypertrophic Cirrhosis of Liver
 Lithæmia (epigastrium)
 Syphilitic Liver
 Trichinosis

135. Bearing Down

Abortion (threatening)

Cervicitis
 Congestion of Uterus
 Dysmenorrhœa
 Distension of Bladder
 Fæcal Accumulation
 Hypertrophic Endometritis
 Hypertrophied Cervix
 Inversion of Uterus
 Labour
 Metritis
 Ovarian Cyst
 Prolapsus Uteri
 Periproctitis
 Prostatitis
 Retained Menses or Decidua
 Retroversion
 Subinvolution
 Uterine Fibroid or Polypus
 (See *Weight*, 134 ;
 Tenesmus, 36)

136. Oppression

Angina Pectoris
 Aortitis
 Asthma, Spasmodic
 Aneurysm
 *Dyspepsia
 Emphysæma
 Exophthalmic Goitre
 Hysteria
 Mediastinal Tumour

OPPRESSION—continued

Pericardial Effusion

(See *Weight*, 134)**137. Faintness (with or without giddiness)**

Anæmia

Aneurysm

Angina Pectoris

Addison's Disease

Ascites

Aortic Disease

Bradycardia

Diphtheria

Dilatation of Heart

Dissecting Aneurysm

Emotion

Exhaustion

Flatulence

Fatty Degeneration of Heart

Heated Air

Hæmorrhage

Intercostal Neuralgia

Leucocythæmia

Menière's Disease

Pregnancy

Pain

Pleural Effusion
(esp. left)

Perforation of Bowel

Poisoning by Depres-
sants

Pneumothorax

Quickening

Shock

Strangulated Hernia

Tapeworm

Thrombosis of Pulm.
Artery(See *Vertigo*, 139)**138. Hutchinson's Mask**A feeling as if the face were
compressed

Locomotor Ataxy

139. Vertigo or Giddiness

Aura epileptica

Asthenopia, Muscular

Alcoholism

Apoplexy (præm.)

Arterio-sclerosis

Bulbar Paralysis
(præm.)

Catalepsy

*Constipation

Cervico-occipital Neur-
algia

Cirrhosis of Kidney

Cinchonism

Corrosive-poisoning

Dilatation of Stomach
(a stomacho læso)

Disseminated Sclerosis

Encephalitis

Epilepsy

Facial Paralysis (onset)

Gastritis (chronic)

Hyperæmia of Brain

Hypertrophy of Heart

VERTIGO—*continued*

Hydrocephalus (chronic)
 Hæmatoma of Dura Mater
 Hereditary Cerebellar Ataxy
 Jaundice
 Laryngeal Vertigo
 Lithæmia
 Labyrinthitis
 Labyrinthine Growths
 Menière's Disease
 Migraine
 Petit Mal
 Plague
 Ptomainism
 Stokes Adams Disease
 Typhus (Inv.)
 Tumour of Brain
 lesions of pons, c. quadrigemina, cerebellum, and middle cerebellar peduncle
 Weil's Disease
 Also abuse of tea or tobacco
 (See *Gait*, 729; *Mal-Coördination*, 743)

WEAKNESS**140. Lassitude and Debility**

Anæmia
 Atony of Stomach
 Convalescence from Acute Disease

Chlorosis
 Carcinoma
 Diabetes
 Dysentery
 Dilatation of Heart
 Exophthalmic Goitre
 Fæcal Accumulation
 Influenza
 Incubation stage of Exanthemata
 Jaundice
 Lipomatosis neurotica
 Leucocythæmia
 Lithæmia
 Myxœdema
 Neurasthenia
 Nephritis
 Pancreatic Disease
 Pyelitis (chronic)
 Pyrexia
 Scurvy

141. Prostration

Acute Yellow Atrophy
 Buhl's Disease
 Cancrum Oris
 Cholera
 Concussion of Brain or Spine
 Diarrhœa (severe)
 Dysentery (late)
 Embolism of Pulm. Artery
 Fat Embolism
 Endocarditis

PROSTRATION—continued

Gangrene of Lung
 Glanders
 Hepatic Colic
 Hæmorrhage
 Hyperpyrexia
 Inversion of Uterus
 Plague
 Ptomainism
 Quinsy
 Relapsing Fever
 Trichinosis
 Typhic state, 143
 Tuberculosis, Acute

142. Collapse

Aniline-poisoning (absorption)
 Acute Alcoholism
 Embolism of Pulmonary Artery
 Hæmorrhage, Profuse
 Hydrophobia (late)
 Hernia, Gangrenous
 Perforation of Diaphragm
 Perforation of Stomach
 Perforation of Intestine
 Pneumo-pericardium
 Rupture of Bladder
 Rupture of Heart
 Rupture of Uterus
 Rupture of Ectopic Amnion
 Rupture of Ovarian Cyst

Poisoning by Aconite and Heart Depressants generally

The three preceding divisions run into one another

143. Typhic State

Anthrax
 Acute Yellow Atrophy
 Dysentery (term.)
 Erysipelas (severe)
 Enteric (severe)
 Extravasation of Urine
 Jaundice (severe)
 Ptomainism
 Plague
 Pyæmia
 Phosphorus-poisoning
 Septicæmia
 Scarlatina, Malignant
 Typhus, Malignant
 Variola, Malignant

144. Loss of Sexual Power

Atrophy of Testes
 Ataxic Paraplegia (early)
 General Paralysis but exalted at first
 Locomotor Ataxy
 Primary Spastic Paraplegia
 Progressive Musc. Atrophy

RIGORS AND CHILLS**145. Rigors or Shivering Fits**

Appendicitis
 Catheterisation
 Calculus, Passage of
 Diphtheria (s)
 Erysipelas (s)
 Empyæma
 Kussmaul's Disease
 Meningitis
 Meningitis, Cerebro-spinal
 Meningitis, Internal Spinal
 *Pneumonia, Acute
 Pyæmia
 Pyelitis, Acute
 Pelvic Abscess
 Pelvic Peritonitis
 Renal Abscess
 Renal Embolism
 Rheumatism, Acute
 Relapsing Fever
 Septicæmia
 Scarlatina (s)
 Suppurative Spinal
 Pachymeningitis
 Suppurative Synovitis
 *Suppuration (onset of)
 Typhus
 Thrombosis
 Ulcerative Endocarditis
 Variola

Weil's Disease (onset)
 Wouillez's Disease (onset)

146. Recurring Rigors

Ague
 Gallstones
 Glanders
 Pleurisy (s)
 Perinephritis
 Renal Calculus
 Tuberculosis, Acute

147. Chills

Chiefly in the back
 Ague
 Coryza (s)
 Dysentery
 Erysipelas
 Glanders, i.
 Herpes Laryngis
 Hysteria
 *Influenza
 Locomotor Ataxy
 Myxædema
 Migraine, i.
 Mumps (onset)
 Pyonephrosis
 Phthisis, Acute
 Pleurisy, Acute
 Periarthritis nodosa
 Remittent Fever
 Rheumatism, Acute
 Salpingitis
 Spasmodic Spinal Paralysis

CHILLS—*continued*
 ‘Spinal Irritation’
 Spinal Meningitis

VISION

148. Double Vision (Diplopia)

Alcoholism
 Asthenopia, Muscular (s)
 Disseminated Sclerosis (s)
 Diphtheritic Paralysis
 Locomotor Ataxy
 Ophthalmoplegia externa
 Paralysis of Third Nerve
 Paralysis of Fourth Nerve
 Paralysis of Sixth Nerve
 Tumour of Brain

(See *Paralysis*, 746)

149. Hemianopsia

Cerebral lesion on side opposite to that of the blind halves

Rupture or Occlusion of Posterior Cerebral Artery

Tumour of posterior part of Internal Capsule, Optic Chiasma, Optic Tract or Occipital Lobe

(See 283)

150. Contraction of Visual Field

Choro-retinitis pigmentosa
 Choroiditis, Exudative
 Detached Retina
 Embolism of Cerebral Artery
 Foreign Body in Cornea, Lens, or Vitreous
 Opacities in Cornea, Lens, or Vitreous
 Glaucoma
 Hæmorrhage into Retina
 Injuries to Eyeball
 Nyctalopia
 Optic Atrophy

151. Hemeralopia (Night blindness)

Ague
 Nephritis
 Retinitis pigmentosa
 Scurvy

152. Muscæ Volitantes (Black specks)

Anæmia of Brain
 Cholera
 Duodenal Catarrh
 Hysteria
 Hypertrophy of Heart
 Hyperæmia of Brain
 *Liver Disorders

MUSCÆ VOLITANTES—
continued

Opacities of Vitreous
Tumour of Brain

**153. Rainbow Edges to
Objects**

Glaucoma

154. Sparks or Flashes

Aura epileptica
Apoplexy (præm.)
Delirium Tremens

Epilepsy

Hyperæmia of Brain

Hypochondriasis

Hysteria

Insanity

Migraine

wavy glimmer

Meningitis

Thrombosis of Cerebral
Vessels

**155. Photophobia (Intoler-
ance of light)**

Anæmia of Brain

Arsenic-poisoning

Cyclitis

Choroiditis

Cinchonism

Encephalitis

Gastritis, Acute (s)

Hyperæmia of Brain

Hypertrophy of Brain

Hysteria

Hooping Cough, 1.

Iritis

Keratitis

Migraine

Measles, 1., and præm.

Meningitis, 1.

Ophthalmia

Retinitis

Trichinosis

Typhus (præm.)

Ulcer or Vesicle of
Cornea

**156. Amblyopia (Feeble
sight)**

Atrophy of Brain

Alcoholism (s)

Bromism

Diphtheritic Paralysis

Hereditary Cerebellar
Ataxy

Hydrocephalus

Locomotor Ataxy

Migraine

Mercurialism

Salicisism

Tobacco, Abuse of

Tumour of Brain

**157. Amaurosis (Blindness
from extra-ocular
causes)**

Anæmia of Brain
(transient)

Amenorrhœa

Cirrhosis of Kidney (s)

Cerebellar Disease

AMAUROSIS—*continued*

Cinchonism
 Cerebro-spinal Meningitis
 Cerebral Hæmorrhage (■)
 Epilepsy
 Embolism of Brain
 Hydrocephalus
 Locomotor Ataxy
 Meningitis
 Syphilis
 Softening of Brain
 Suppression of Menses, Sudden
 Tumour of Brain
 Tobacco Abuse
 Uræmia

HEARING

158. Deafness

Adenoids
 Atrophy of Brain
 Anchylosed Ossicles
 Auditory Neuritis
 Bromism
 Congenital Deafness
 Coryza
 Cinchonism
 Diphtheria
 Enteric Fever
 Emotions
 Eustachian Obstruction
 Exanthemata (slight)

Hay Fever
 Hysteria
 Hydrocephalus
 Hæmorrhage, Intracranial
 Lead-poisoning (s)
 Leucocythæmia (late)
 Locomotor Ataxy (s)
 Labyrinth, Tumours and Cancer of
 Lesion of Medulla, Pons, or Superior Temporo-sphenoidal Convolution
 Menière's Disease, II.
 Meningitis esp. basilar
 Meningitis, Cerebro-spinal
 Mumps
 Mental Strain
 Measles
 Nephritis, Chr.
 Nervousness
 Otitis media
 Otitis interna
 Polypi, Nasal
 Polypi, Aural
 Pharyngitis
 Ruptured Tympanum
 Rheumatoid Arthritis
 Salicism
 Shock
 Syphilis
 Typhus

DEAFNESS—continued

Uræmia

Wax in Meatus

159. Exalted Hearing

Convalescence from

Fevers

Epilepsy

Gastritis, Acute

Hysteria

Hydrophobia

Hypochondriasis

Inflammation of Brain
or Membranes

Migraine

Nervousness

Tetanus

Tumours of Brain

160. Tinnitus Aurium (Subjective sounds)

Aura epileptica

Alcoholism, Chronic

Anæmia of Brain

Aneurysm of Base of
Skull

Apoplexy (præm.)

Blow upon Head

Cinchonism

Cervico-occipital Neur-
algia

Catalepsy (præm.)

Cholera

Delirium Tremens

Enteric Fever

Ergotism

Hypertrophy of Heart

Hysteria

Indigestion (s)

Leucocythæmia

Lithæmia

Mumps

Meningitis

Malaria

Mania

Menière's Disease

Otitis, Suppurative

Obstructed Eustachian
Tube

Polypus, Nasal or Aural

Remittent Fever

Typhus

Tumour of Brain

Tapeworm

Thrombosis, Cerebral

*Wax in Meatus

TUNING-FORK**161. Sound Increased**

Obstructive Deafness

Over-tension of Mem-
brane or Ossicles**162. Sound Diminished**

Nervous Deafness

163. Positive Rinne

(normal condition)

The tuning-fork placed
opposite the meatus is
still audible after it has
ceased to be heard while
in contact with the
mastoid process

TUNING-FORK—*continued*

Negative Rinne

inaudible as above

Defective Sound Conduction

164. Positive Weber

(Weber +)

The tuning-fork placed on the forehead is heard loudest in the deaf ear

Obstructive Deafness

Negative Weber

(Weber —)

The tuning-fork placed on the forehead is heard loudest in the sound ear

Nerve Deafness in the deaf ear

TASTE

165. Lost or Impaired (Ageusia)

Anæsthesia or Paralysis of Fifth Nerve

Bulbar Paralysis

Bromism

*Coryza

Facial Paralysis

when chorda tympani is involved

Hysteria

Nasal Polypus or Obstruction

Paralysis of Glosso-pharyngeal

Rhinitis, Atrophic

Tongue dry or thickly furred

Tumour of Brain

166. Perverted (Parageusia)

Hysteria

Insanity (see *Pica*, 31)

167. Foul (Cacogeusia)

Duodenal Catarrh

Dyspepsia

Epilepsy

*Fæcal Accumulation

Gangrene of Lung

Gastric Irritation

Hysteria

Insanity

Jaundice

Lithæmia

Liver Affections

Myxœdema

Peritonitis

Poisoning by Arsenic,

Copper, Mercury,

Lead, Iodides, or

Tartar Emetic

Phthisis

Teeth, Caries of

Typhus

Variola

SMELL

168. Lost or Impaired (Anosmia)

Adenoids

ANOSMIA—*continued*Abscess at Root of
Nose

Aphasia (unilateral, s)

*Coryza

Cerebellar Tumour

Congenital Absence of
Olfactory Bulbs

Facial Paralysis (s)

Hysteria

Hydrocephalus

Injuries to Head

Noxious Vapour

Occlusion of Nostrils

Olfactory Clefts

Ozæna

Paralysis of Fifth Nerve
from dryness of mucous
membrane

Polypi

Rhinitis, Atrophic

Rhinoliths

Syphilis

Tumour of Brain

post. third of internal
capsule (unilateral)

Typhus

Tobacco, Abuse of

169. Subjective Smells

Aura epileptica

Hysteria

Insanity

Myxœdema

Meningitis

Tumour of Brain

front of temporo-sphen-
oidal lobe

SWALLOW

170. Dysphagia

Aortic Aneurysm

Atlanto-axial Disease

Bronchial Glands, En-
largedCrico-arytenoid
Arthritis

Chorea

Cancer of Tongue,
Larynx, Pharynx, or
Œsophagus

Concretions in Tonsil

Diphtheria

Glandular Fever

Glossitis

Goitre (x)

Gumma of Pharynx

Hydropericardium

Herpes of Pharynx

Impacted Foreign Body

Laryngitis

Laryngitis, Tubercular

Lymphadenoma

Lupus of Throat (slight)

Measles

Mercurial Stomatitis

Œsophagismus

Œsophagitis

Pharyngeal Plaque
muqueuse

DYSPHAGIA—*continued*

Pharyngitis
 Perichondritis of
 Larynx
 Parotitis
 Pachydermia Laryngis
 Pleural Effusion, Large
 Post-pharyngeal
 Abscess
 Ptomainism
 Quinsy
 Tubercular Pharyngitis
 Scarlatina
 Sarcoma of Pharynx
 Spasm of Pharynx
 Stricture of Œsopha-
 gus

Stomatitis
 *Tonsillitis
 Tonsillitis, Rheumatic
 or Gouty
 Tonsillitis, Septic
 Tonsillitis, Syphilitic
 Typhus
 Tubercle of Pharynx
 Tumour of Media-
 stinum
 Tetanus
 Trichiniasis
 Volvulus of Œsophagus
 Variola or Varicella
 eruption on fauces
 (See *Paralysis of Deglu-*
 tition, 755)

PART II

INSPECTION AND OBSERVATION

CONTRACTIONS : s, sometimes ; u, usually ; x, exceptionally ; i, first stage ; ii, second stage ; iii, third stage ; *, the most probable or characteristic disease.

NUTRITION

171. Development of Fat

Alcoholism
Chlorosis
Cretinism
Cessation of Active Habits
Cessation of Active Occupation
Dementia
Encephalitis (s)
Lipomatosis neurotica
Myxœdema
Menopause
Mitral Disease (s)
Pseudo-hypertrophic Paralysis
Rickets
Sclerosis, Disseminated

172. Local Muscular Wasting

Amyotrophic Lateral Sclerosis
hand, etc.

Bulbar Paralysis
tongue, lips, and (later) limbs

Circumflex Paralysis
deltoid

Compression of Cord

Idiopathic Muscular Atrophy
including face

Infantile Paralysis

Injury to Motor Nerve

Lead Palsy

Myelitis, Acute
esp. when in lumbar enlargement

Morvan's Disease

Neuritis, ii.

Peripheral Paralysis in general
very rapid

Polymyositis
muscles firm

Pseudo - hypertrophic Paralysis (latissimus dorsi)

in strong contrast to infraspinatus

MUSCULAR WASTING—

continued

Progressive Muscular Atrophy

'main en griffe.' Ball of thumb first

Rheumatism, Old

Sciatica, Old

Syringomyelia
hand first

Spinal Tumour

Spinal Paralysis of Adults, Acute

Spinal Paralysis, Chr. Atrophic

173. General Wasting and Cachexia

Anæmia

Addison's Disease

Bronchiectasis

Bronchorrhœa

Cirrhosis of Stomach

Cirrhosis of Lung

Carcinoma

Constipation, Habitual

Cholera

Cholangitis, Chr. Fibrous

*Diabetes

Diarrhœa

esp. in infants

Dysentery

Dilatation of Stomach

Duodenal Catarrh

Enteritis

Empyæma

Exophthalmic Goitre

Exanthemata, The

Gastritis, Chronic

Growth, Rapid

Hydatids

Hæmorrhages

Intrathoracic Tumours

if obstructing thoracic duct

Infantile Scurvy

Jaundice

Lactation, Prolonged

Locomotor Ataxy

Menopause

Melancholia

Malaria

Meningitis

Marasmus

Mollities Ossium

Measles

even from 3rd. day of incubation

Morphinism

Myelitis, II.

Overfeeding (infants)

Ovarian Cyst

Pelvic Abscess

Phthisis

Peritonitis, Tubercular

Pancreatic Disease

Pyloric Obstruction

Relapsing Fever

Sprue

Stricture of Œsophagus

Suppuration, Chronic

GENERAL WASTING—*continued*

Syphilis, Hered. or Tertiary

Tabes mesenterica

Tuberculosis, Acute

Worms (s)

SKIN**174. Dry (Anidrosis)**

Ascites

Ague (hot stage)

Atrophy, Senile

Cretinism

Compression of Cord,
Slow

Dysidrosis

Diabetes

Enteric Fever

Gout (attack)

Influenza

Ichthyosis

Myxœdema

Melancholia

Perinephritis

Peritonitis, Chronic

Psoriasis

Prurigo

Rheumatoid Arthritis
except handsSyringomyelia
affected limb

Scleroderma

Scurvy

Tumour of Brain

Xeroderma

* * A dry skin is the normal condition in many persons

175. Clammy

Angina Pectoris

Arsenic-poisoning

Alcoholic Coma

Collapse (see 142)

Colic

Delirium Tremens

Hepatic Colic

Intestinal Obstruction

Lead-poisoning

Menière's Disease

Shock

Syncope

Sunstroke

Thrombosis, Cerebral

SWEATING**176. General**

*Ague, III.

Apoplexy

Bronchiectasis (night)

Bronchitis, Capillary

Debility

Defervescence

Diaphoretics

Dropsy, Cardiac

Epilepsy

Emotions

Exophthalmic Goitre

Fatty Degeneration of
Heart

Glanders

SWEATING—*continued*

Gout, II.

Hydatid of Lung (night)

Influenza

Phthisis (night)

Polymyositis

Pyæmia

Pyonephrosis

Pneumonia

Pulmonary Osteo-
arthropathy

Remittent Fever

Relapsing Fever

Renal Colic

*Rheumatism, Acute

Spinal Apoplexy

Septicæmia

Trichinosis

Tuberculosis

177. Partial

Hemiplegia (x)

unilateral

Intrathoracic Aneurysm
or Tumour

side of face

Facial Hemihypertrophy
affected side

Bromidrosis

feet and axillæ

Suppurative Parotitis
unilateral

Rickets

head

178. Chylo-serous

Chyluria (rare)

179. Bloody (Hæmidrosis)

General Paralysis of

Insane

Hysteria

Rupture of Capillaries
into Sweat Ducts

Self-inflicted Punctures

180. Coloured (chromidrosis)Usually in neurotic young
women

Red

bacteria

Green or blue

iron or copper internally

181. Offensive

Bromidrosis

Rheumatic Fever

Scurvy

Variola

Pallid, see *Face***182. Yellow**

Anæmia of dark persons

Bruises, III.

Chlorosis

Hæmorrhage

Jaundice (230)

Mucous Disease

Nitric-acid Stains

Pernicious Anæmia

lemon

Paroxysmal Hæmoglo-
binuria

YELLOW—continued

Yellow Fever

Xanthelasma

esp. eyelids

* * Yellow palms are said
to be common in enteric
fever

183. Pigmented or Bronzed Patches

* Addison's Disease

Acanthosis nigricans
wartly

Abdominal Tumours (s)

Arsenic-poisoning

Diabetes (s)

Exophthalmic Goitre

Kidney, Contracted (s)

Lepra anæsthetica

Leucoderma

Morphæa

Melanotic Liver

Malarial Cachexia

Pregnancy

Pellagra

Rheumatoid Arthritis

Recklinghausen's Dis-
ease

Syphilis (s)

Tinea versicolor

Urticaria pigmentosa

(See 495)

* * Also intermittent press-
ure (garters, collar-stud,
etc.)

184. Grey

Argyria

Antifebrin

slaty anæmia

185. White Patches

Facial Hemiatrophy

Keloid

Leprosy

Leucoderma

pigmented border

Morphæa

not hard

Scleroderma

hard

Scars

186. Cyanosis (see Face, 226)**187. Thickened**

Abscess, Impending

Cellulitis

Erysipelas

Ichthyosis

Keloid

Lichen ruber

Leprosy

Phlebitis

Scars

Scleroderma

Sclerema

Sclerodactyla

fingers and face

(See *Edema*, 191)**188. Red**

Acute Articular Osteitis

Abscess

Chilblain

RED—continued

Cellulitis

Erythema

Erythema nodosum

Erysipelas

Erythromelalgia

Gout

Lymphangiectasis

Neuritis (x)

Rubefaciens

Scalds and Burns

Synovitis, Acute

Scarlatina. (see *Erythema*, 197; *Face*, 226)**189. Sudamina and Miliaria**

Cheiropompholyx

Enteric Fever

Hyperidrosis

Meningitis, Cerebro-spinal

Malignant Fevers

Phthisis

Pneumonia, Acute

Rheumatism, Acute

Relapsing Fever

Trichinosis

190. Petechiæ and Ecchymosis

Ague

Amyloid

Anæmia

Barlow's Disease

Blows

Buhl's Disease

Cancer of Liver

Cerebro-spinal Meningitis

Cirrhosis of Liver

Chloralism

Dysentery

Dilatation of Heart

Diphtheria

Erythema multiforme

Hæmophilia

Iodism

Infective Endocarditis

Jaundice

Leucocythæmia

Measles

Malignant Fevers

esp. variola and typhus

Nephritis

Psittacosis

Plague

*Purpura hæmorrhagica

Pernicious Anæmia

Phthisis (s)

Peliosis rheumatica

Remittent Fever

Rupture of Vein

Rheumatism, Acute (s)

Scurvy

Typhic state (143)

Valvular Disease

Yellow Atrophy, Acute

Yellow Fever

191. Œdema and Anasarca

Abscess
 Angio-neurotic Œdema
 Amyloid (late)
 Atrophy of Heart
 Aortic Disease (x)
 very advanced cases
 Aortic Aneurysm
 Anæmia
 Beri-beri
 Buhl's Disease (s)
 Bronchitis, Chronic (s)
 Cellulitis
 Cirrhosis of Liver
 (term.)
 Cirrhosis of Lung
 Dilatation of Heart
 Diabetes (late)
 Displaced Heart
 Erysipelas
 Empyæma
 affected side (s)
 Emphysæma (late)
 Extravasation of Urine
 Fatty Degeneration of
 Heart
 Fibroid Disease of
 Heart
 Glanders
 Gout
 Hysterical Œdema
 bluish, not pitting
 Hypertrophy of Heart,
 II.
 Malformation of Heart

Mitral Regurgitation

Myxœdema

not pitting

Nephritis, Acute and
Chronic

Neuritis (x)

Pericardium, Adherent

Pneumo-peritonæum
epigastrium

Perinephritic Abscess
lumbar region

Pleural Effusion
same side (x)

Suppurative Synovitis

Scurvy (feet)

Syphilitic Disease of
Heart

Tricuspid Regurgitation

Urticaria (see *Limbs*,
481; *Face*, 237)

**192. Emphysæma, Inter-
stitial**

Pneumothorax (s)

Perforation of Stomach
or Bowel (x)

Ulceration of Larynx;
Wound of Lung,
Larynx, or Intestine

193. Inelastic

Atrophy, Senile

Coma

Cholera

Enteric Fever

Meningitis

INELASTIC—continued

Syphilis, Hereditary

Typhus

Typhic state (143)

194. Glossy

Gout

Injury to Nerves

Leprosy — non-Tuber-
culated

Syringomyelia

Stretched Skin (from
any cause)**195. Desquamation**Sequel of Dermatitis of
some kind

Dengué

Erythema (s)

Erysipelas

Enteric Fever (x)

Eczema

Favus (yellow)

Gout

Herpes

Ichthyosis

Lupus

Measles

branny

Psoriasis

Pityriasis

Pityriasis rubra

flakes

Rötheln (slight)

Scurvy (legs)

***Scarlatina**flakes—from 7th day to
about 7th week

Syphilis

Seborrhœa

fatty scales

Tinea tonsurans

Xeroderma

196. Scars follow

Anthrax

Abscess

Acne rosacea

Burns (if deep)

Boils

Carbuncles

Ecthyma (severe)

Gangrene

Herpes zoster

Lupus vulgaris

bluish, papery

Lupus exedens

Lupus syphiliticus

large

Lupus erythematosus

Ulcers

Varicella (s)

Variola

Wet-cupping

Wounds

197. Erythema

Arnica

Antipyrin

Arsenic

Bromism

ERYTHEMA—*continued*

Belladonna
 Boric Acid
 Copaiba
 Croton Oil
 Cerebro-spinal Meningitis
 Chloral
 Cubebs
 Dengué
 Extravasation of Urine
 Erythema simplex
 E. scarlatiniforme
 common after operations
 —throat normal
 Erysipelas
 Gout
 Hydroa, I.
 Intertrigo
 Iodism (x)
 Malingering
 Ptomainism
 Phlebitis
 Pellagra
 Quinism
 Rubefacients
 Rhubarb
 Raynaud's Disease
 Rötheln
 Sulfonal
 Salicylic Acid
 Scarlatina
 neck first
 Urticaria
 around wheals

198. Macules

Dermatitis herpetiformis
 Freckles
 Lupus
 Nævus
 Roseola (s)
 Syphilis
 Spilus
 Typhus
 mulberry—chiefly on abdomen

199. Papules

A papule may be the first stage of a vesicle, pustule, or crust
 Dermatitis herpetiformis
 Enteric Fever
 lenticular—several crops, chiefly about hypochondria
 Lichen
 Lichen ruber
 flat and sometimes umbilicated
 Measles
 face first; spots isolated at first, afterwards grouped
 Psittacosis
 Phthiriasis
 Prurigo
 Rötheln
 Roseola
 Scabies

PAPULES—continued

Syphilis

Variola

first 3 days of eruption
—face and wrists first

Varicella

several crops

200. Vesicles

Anthrax

Arnica externally

Antimony externally

Arsenic-poisoning,
Chronic

Bromism

Cheiropompholyx

Dermatitis repens

Dermatitis herpeti-
formis

Eczema

Grocer's Itch

Glanders

Hydroa

Herpes zoster

track of a nerve, u. rt.
intercostal

Herpes iris

rings

Herpes simplex

Miliaria

Syphilis

Scabies

esp. between fingers

Sudamina

Sulphur Inunction

Varicella

12th to 36th hour of disease,

not umbilicated, collapse
on pricking, several
crops, fluid rarely
turbid

Variola

3rd to 6th day, umbili-
cated, do not collapse on
pricking, single crop, be-
come turbid before dry-
ing up.**201. Bullæ**

Blisters

Burns

Cheiropompholyx

Dermatitis herpeti-
formis

Erysipelas

Gangrene, I.

Glanders

Hydroa

Leprosy

Morvan's Disease

Meningitis, Cerebro-
spinal

Pemphigus

Raynaud's Disease
black and symmetrical

Rupia, I.

Scald

Syringomyelia
affected limb

Scurvy

containing blood

Syphilis, Hereditary

202. Pustules

Anthrax

PUSTULES—*continued*

Ecthyma
 Eczema pustulare
 Glanders
 Impetigo contagiosa
 Porriigo
 Scabies
 Sycosis
 Variola
 Varicella (x)

203. Tubercles

Acne
 Bromism
 Epithelioma
 Elephantiasis
 Iodism (x)
 Keloid
 Lupus
 Molluscum
 Phyma
 Recklinghausen's Disease
 generalised neuro-fibro-
 mata
 Rodent Ulcer
 Sycosis
 Scrofula
 Syphilis
 Vitiligo
 Warts
 Yaws

204. Crusts

A crust may be the last

stage of an eruption
 which began as a papule

Acne sebacea
 fatty
 Eczema
 Erythema
 Favus (scutula)
 yellow
 Impetigo
 Leprosy
 Rupia
 Ringworm (s)
 Sycosis
 Scabies
 Variola

205. Parasites

Achorion Schönleinii
 (Favus)
 Acarus scabiei
 (Itch)
 Microsporon Audouinii
 (Alopecia)
 Microsporon furfur
 (Pityriasis versicolor)
 Microsporon mentagrophytes
 (Sycosis)
 Pediculus corporis
 (Phthiriasis)
 Trichophyton tonsurans
 (Ringworm)

206. Wheals

Angio-neurotic Oedema

WHEELS—continued

Cerebro-spinal Meningitis

Dermatitis herpetiformis

Polymyositis

Peliosis rheumatica

• *Urticaria

Also Nettle-sting and
the internal use of

Antipyrin

Antimony

Bromides

Copaiba

Iodides

Morphine

Quinine

Santonin

Sulfonal

(h) Gouty

superficial, over gouty
joints(i) Syphilitic, Tertiary
abrupt edges with dark red
areola

(j) Lupous

(k) Rodent

(l) Cancerous
secondary deposit in glands

(m) Varicose

(n) Œdematous
œdematous granulations
usually imply diseased
bone

(o) Hæmorrhagic

(p) Irritable

(q) Inflamed

(r) Indolent

u. on leg

(s) Phagedænic

207. Ulcers

(a) Simple

(b) Inflammatory
u. lower part of shin,
'angry,' sharp edges

(c) Eczematous

(d) Cold
fingers and toes

(e) Senile

(f) Tubercular
on neck or near a joint,
oval or confluent, bleeds
easily, edges under-
mined, pink areola(g) Scorbutic
'bullock's liver crusts'**HEAD****208. Shape and Size Altered**Acromegaly
enlarged bones and soft
partsAchondroplasia
large and broad, 'bulldog'
typeCretinism
large, flat-toppedHydrocephalus
large and sphericalHypertrophy of Brain
even enlargement

SHAPE AND SIZE ALTERED

—*continued*

Infantile Hemiplegia

flattened on one side

Idiocy, Microcephalic

small and triangular, with
apex at crown

Mongolian Imbecility

short and spherical

Idiocy, Macrocephalic

large and irregular

Osteitis deformans

large

Rickets

quadrilateral profile; high,
square, and prominent
forehead

Syphilis, Hereditary

depressed sutures

'hour-glass' or 'hot-cross
bun' head

209. FONTANELLES

These should all close
before end of second
year

210. Bulging

Hydrocephalus

Hyperæmia of Brain

Meningitis

Tumour of Brain

Ventricles, Effusion into

211. Depressed

Anæmia of Brain

Cholera

Diarrhœa

Marasmus

Spurious Hydrocephalus

All Infantile Wasting
Diseases

212. Late in Closing

Hydrocephalus

Rickets

213. Large

Cretinism

Hydrocephalus

*Rickets

Syphilis, Hereditary

214. Broad Sutures

Cretinism

Hydrocephalus

Rickets

215. Overlapping Sutures

Infantile Wasting Dis-
eases (see *Depressed*
Fontanelles, 211)

216. Craniotabes

Areas of thinned bone
in occipital and parietal
bones

Hydrocephalus

Rickets

Syphilis

217. Head Fixed

Atlanto-axial Disease

Ankylosis of Spine

FIXED—continued

Caries of Spine (see
Stiff Neck, 386)

218. Voluminous

normal under 2 months

Hydrocephalus

Idiocy

Rickets

219. Retracted

Cerebro-spinal Menin-
gitis

*Basilar Meningitis,
Tubercular or Simple.

Hystero-epilepsy

Internal Spinal Menin-
gitis

Strychnine-poisoning

Tetanus

Tumours of Brain
subtentorial

Typhic state (s), (143)

220. Oscillating

Epilepsy

Friedreich's Disease

Hereditary Cerebellar
Ataxy

Menière's Disease

*Rickets

221. Edematous

Abscess

Anasarca

Erysipelas

Glanders

forehead

Otitis interna, Suppura-
ting

behind ear

Thrombosis of Lat.
Sinus

behind ear

Thrombosis of Superior
Longitudinal Sinus

forehead

(see *Anasarca*, 191)

222. Enlarged Veins

Hydrocephalus

Tubercular Meningitis

Tumours of Neck

Thrombosis of a Sinus

223. Baldness or Thin Hair

Anæmia

Convalescence from
Fevers

Cretinism

Exophthalmic Goitre

Erysipelas

Hydrocephalus

Inheritance

Myxœdema

Mongolian Imbecility

Phthisis

*Seborrhœa

Syphilis

Senility

224. Bald Patches

Alopecia

BALD PATCHES—continued

Favus
 Facial Hemiatrophy
 Lupus erythematosus
 *Ringworm
 Rickets
 back of head
 Scars

FACE**225. Pallid**

Angina Pectoris
 Atony of Stomach
 Asthma, Spasmodic
 or cyanosed
 Amyloid
 Anæmia
 Aortic Stenosis
 Atrophy of Heart
 Amenorrhœa
 Alcoholic Coma
 Concussion of Brain
 Compression of Brain
 termination
 Chlorosis
 in blondes
 Collapse
 Colic
 Cholera
 Cancer of Pancreas
 Dilatation of Heart
 Dysentery
 Epilepsy, i.
 Exophthalmic Goitre

Gastric Irritation
 Hæmorrhage
 Hæmatocele
 Inversion of Uterus
 Kussmaul's Disease
 Leucocythæmia
 Lymphadenoma
 Menorrhagia
 Myxœdema
 waxy
 Menière's Disease
 Mercurialism
 Mitral Stenosis, i.
 Mucous Disease
 Myocarditis, Acute
 Nephritis, Chronic
 Ovarian Disease
 Phthisis, i.
 Petit Mal
 Plague
 Rheumatoid Arthritis
 Spinal Concussion
 Syncope
 Shock
 Trance
 Tubercular Meningitis
 alternating with flushes
 Thrombosis of Pul-
 monary Artery
 Tuberculosis
 Tabes mesenterica
 (See *Anæmia*, 982)

226. Flushed
 Apoplexy

FLUSHED—continued

Ague

hot stage

Alcoholism, I.

Cancrum Oris

one cheek

Concussion of Brain, III.

Enteric Fever, III.

hectic

Fevers, I.

Hysterical Convulsions

Phthisis, III.

hectic

Pneumonia, Acute

Pleurisy, Acute

Remittent Fever

Rheumatism, Acute

Uterine Tumours

227. Transient Flushes

Amenorrhœa

Constipation

Enteric Fever

Exophthalmic Goitre

Indigestion

Menopause

Spinal Irritation

Tubercular Meningitis

228. Venous StigmataPatchy redness with groups
of enlarged venules

Alcoholism

Cirrhosis of Liver

Erythromelalgia

Facial Hemi-hyper-
trophy

Vomiting, Chronic

229. Earthy or Sallow

Anæmia of Dark Persons

Atony of Stomach

Cirrhosis of Liver

Chlorosis

greenish-grey

Cancerous Cachexia

Constipation

Duodenal Catarrh

Enteritis, Chronic

Exophthalmic Goitre

Facial Hemiatrophy

parchment-like yellowish
patches

Fæcal Accumulation

Fatty Degeneration of
Heart

Gastritis, Chronic

Hepatic Abscess

Lead-poisoning

Pleurisy in Children

Pernicious Anæmia

lemon colour

Rheumatoid Arthritis

Syphilis, Hereditary

'café au lait'

J- JAUNDICE**230. Nervous**

Anxiety

Concussion of Brain (x)

Fright

JAUNDICE—*continued*

231. Obstructive

(a) INTRINSIC

Duct-wall and lumen
 Congenital Deficiency
 of Duct
 Catarrh of Bile-ducts
 Chronic Fibrous Cholangitis
 Distomata
 Foreign Bodies from
 Intestines
 Gallstones
 'Inspissated Bile' (?)
 Stricture of Duct
 spasmodic or organic
 Tumefaction of Duct-wall

(b) EXTRINSIC

Pressure upon duct or its
 branches
 Aneurysm
 (Abdominal Aorta,
 Hepatic Artery, or
 Superior Mesenteric
 Artery)
 Cancer of Liver, Duodenum,
 Pancreas, Right Kidney, or
 Omentum
 Cirrhosis of Liver
 Cyanotic Liver
 Duodenitis
 Duodenal Scar from
 old Ulcer

Fæcal Accumulation (x)
 Hepatitis, Acute (x)
 Hepatic Glands, Enlarged
 Hepatic Abscess (x)
 Hydatids
 Icterus neonatorum
 Lymphadenoma
 Perihepatitis
 from contraction
 Peritonitis (s)
 from contraction
 Pneumonia, Acute
 slight
 Pancreatitis, Acute-(s)
 Pregnancy (x)
 Syphilitic Liver
 Tumours of Duodenum,
 Kidney, Liver, Pancreas,
 Ovary, Omentum,
 Stomach, or
 Uterus

232. Toxæmic

Ague
 Acute Yellow Atrophy
 Buhl's Disease
 Endemic Jaundice
 Endocarditis, Ulcerative (s)
 Hæmorrhage
 Pyæmia
 Poisoning by Antimony,
 Copper, Liquid Chloroform,
 Mercury, or
 Phosphorus

JAUNDICE—continued

Pernicious Intermittent
Fever
Remittent Fever
Relapsing Fever
Snake-poison
Weil's Disease
Winkel's Disease
Yellow Fever

233. Livid or Cyanosed

Due to insufficient oxygen
reaching the hæmo-
globin, or *vice versa*
Aneurysm of Heart
Aneurysms, Intrathor-
acic (s)
Aniline-poisoning
Ague (cold stage)
Ascites, Excessive
Asthma, Spasmodic
Asphyxia
Bronchitis, Acute
Bronchitis, Capillary
Collapse of Lung
Cancrum Oris
one cheek
Croup, Spasmodic
Dilatation of Heart
Displaced Heart
Dyspnœa, Acute (725)
Epilepsy, II.
Emphysemæ (late)
Foreign Body in Air-
passages
Glossitis, Acute

Hooping Cough (par-
oxysm)

Hydrothorax, Sudden
Hypertrophy of Right
Ventricle

Hypostatic Congestion
of Lungs

Laryngitis, Acute

*Malformation of Heart
Mitral Disease

Myocarditis, Acute

Mediastinal Tumours

Œdema of Lung

Œdema Glottidis

Paralysis of Diaphragm

Paralysis of Respira-
tory Muscles

Pernicious Intermittent

Pericarditis

Pericardium, Adherent

Pericardial Effusion

Pulmonary Apoplexy

Pneumonia, Acute

Pneumonia, Lobular

Poisoning by Strych-
nine

Sunstroke (s)

Thrombosis of Pulmon-
ary Artery

Tympanites

Winkel's Disease

234. Sides Unequal

Congenital Asymmetry

Congenital Torticollis

SIDES UNEQUAL—*cont.*

Facial Hemihyper-
trophy

Facial Hemiatrophy

Facial Paralysis, Old
esp. if dating from child-
hood

Infantile Paralysis, Old
Paralysis of Cervical
Sympathetic

235. Flapping Cheek

Apoplexy

Coma

Facial Paralysis

Diphtheritic Paralysis

* * Beware of unilateral
toothlessness!

236. Pinched

Atrophy

Ague (cold stage)

Cholera

Colic

Collapse (142)

Diarrhœa

Dysentery

Enteric Fever

Facies Hippocratica

Gangrene of Lung

Hæmorrhage

Idiopathic Muscular
Atrophy

Phthisis

Remittent Fever

Rheumatoid Arthritis

Spinal Caries

Strangulated Hernia

Scleroderma

Tuberculosis

Tabes mesenterica

Wasting Diseases (173)

237. Swollen

Acromegaly (s)
not pitting

Actinomycosis
lower jaw

Anasarca (191)

Boils

Cancrum Oris
one cheek

Cretinism

Dacryocystitis

Dropsy etc. of Antrum

Dental Abscess

Dengué

Emphysæma (late)

Erysipelas

Enlarged Bronchial
Glands (s)

Hydrocephalus (s)

Hooping Cough

Leprosy (leontiasis)

Mumps

Myxœdema
not pitting

Mediastinal Tumour

Œdema, Circumscribed
Acute

Œdema (see 191)

Pneumothorax

SWOLLEN—continued

Sclerema
not pitting

Scurvy

Trichinosis

Urticaria

Variola, Confluent

A puffy face is also common
in wasted infants

EXPRESSION**238. Vacant**

Adenoids

Anæmia

Bulbar Paralysis

Collapse

Cretinism

Diphtheritic Paralysis

Dementia

Enteric Fever

Facial Paralysis

Hydrocephalus

Idiocy

Idiopathic Muscular
Atrophy

Myxœdema (sad)

Plague

Paralysis of Insane,
General

Typhus

Worms

239. Anxious (‘Anxietas’)

Appendicitis

Angina Pectoris

Spasmodic Asthma

Aneurysm

Colic

Dyspnœa, Acute (725)

Dysentery

Diaphragmatic Pleurisy

Empyæma

Emphysæma, Intersti-
tial

Fatty Degeneration of
Heart

Fractured Ribs

Glossitis, Acute

Gangrene of Lung

Hydrophobia

Hepatic Abscess

Intestinal Obstruction,
Acute

Laryngitis, Acute

Laryngitis, Diphtheritic

Lead Colic

Myocarditis, Acute

Œdema Laryngis

Pneumothorax

Pleurisy, Acute

Pericarditis

Peritonitis, Acute

Strangulated Hernia

Septicæmia

Uræmia

240. Threatening

Delirium Tremens
or suspicious

Encephalitis

Hydrophobia

Mania

241. Unmeaning Grimaces

Chorea
 Hereditary Cerebellar
 Ataxy
 Hydrocephalus
 Hysteria
 Insanity
 Strychninism
 Spasm of Facial Nerve
 Tetanus

* * Beware of malingerers !

242. Risus Sardonius

Abdominal Cancer
 Inflammation of Dia-
 phragm
 Peritonitis
 Strychnine-poisoning
 Spasm of Facial Nerves
 Tetanus
 Ulceration of Intestine

EARS**243. Tophi**

Gout in system

244. Hæmatoma (Blood tumour)

Dementia
 General Paralysis of
 Insane
 Idiocy
 Mania
 Melancholia

245. Waxy

Addison's Disease
 Anæmia
 Chlorosis
 Frostbite
 Leucocythæmia
 (See *Pallor*, 215)

246. Livid

Malformation of Heart
 Dyspnœa (see 726)
 Cyanosis (see 233)

247. Swollen

Abscess
 Blows
 Inflamed Tophi
 Œdema (see 191)

248. Gangrenous

Frostbite
 Raynaud's Disease

249. Bleeding from Meatus

Caisson Disease
 Fracture of Base of
 Skull
 Polypus
 Rupture of Membrana
 Tympani

250. Otorrhœa (Discharge from meatus)

Caries of Temporal
 Bone
 Eczema of Meatus
 Fracture of Base of Skull
 cerebro-spinal fluid

OTORRHŒA—continued

Otitis media, Chronic
(fetid)

Pachymeningitis

Polypus
blood-stained

Thrombosis of Lateral
Sinus

A sequela of Measles,
Mumps, Scarlatina,
Teething, Diphtheria,
or Tonsillitis

** Beware of mistaking
liquid cerumen

EYES**EYELID****251. Swollen**

Anasarca (see 191)

Anæmia
lower lids

Cyst of Lid

Dacryocystitis

Erysipelas

Frontal Sinus Distension
upper lid

Glaucoma (s)

Glanders

Hay Fever (x)

Hooping Cough
sometimes ecchymosed

Injuries

Iodism

Myxœdema

Stings

Stye

Varicella (s)

Variola (s)

Urticaria

252. Darkened

Amenorrhœa

Anæmia

in dark persons

Chlorosis

Hepatic Colic (severe)

Leucorrhœa

Menstruation (s)

Menorrhagia

Phthisis

Scurvy

253. Tophi

Gout in system

254. Nictitation (Blinking)

Asthenopia

Chorea

Catalepsy, II.

Epilepsy

Hysteria

Reflex Irritation

worms, cold, dentition, etc.

Tumours

pressing on facial nerve

Temporal Caries

Trigeminal Neuralgia

255. Drooping (Ptosis)

Apoplexy

Concussion of Brain

Conium-poisoning

Diphtheritic Paralysis

250-255

EYELID—continued

Gummata

Locomotor Ataxy

Ophthalmoplegia externa

*Paralysis of Third Nerve

Trigeminal Neuralgia (s)

Tubercular Meningitis

256. Always open (Lagophthalmos)

Contraction of Scars

Exophthalmic Goitre

Facial Paralysis

Tumour of Orbit

257. Stellwag's Sign

Increase in size of palpebral fissure out of proportion to the exophthalmos

Exophthalmic Goitre

258. v. Graefe's Symptom

The upper eyelid follows the downward movement of the eyeball instead of accompanying it

Exophthalmic Goitre

259. Crusted Edges

Eczema

Intestinal Irritation
esp. worms

Ophthalmia

Sycosis Tarsi

Stye

Tinea Tarsi

260. Blue Secretion

Chromidrosis

SCLEROTIC**261. Pearly**

Anæmia

Addison's Disease

Chlorosis

262. Yellow

Alcoholism

Jaundice (see 230)

Melancholia

Subconjunctival Fat

CONJUNCTIVA**263. Dry**

Collapse

Trigeminal Anæsthesia

264. Watery

Chronic Alcoholism

Asthma, Spasmodic

Chlorosis

Coryza

Dacryocystitis

Displacement of Punctum

Facial Paralysis

Foreign Body

Hay Fever

Hooping Cough, i.

Iodism

Influenza

CONJUNCTIVA—*continued*

Measles (early)
 Neuralgia of Fifth Nerve
 Obstruction of Nasal
 Duct
 Typhus (prodr.)

265. Purulent Discharge

Conjunctivitis—
 Simple
 Diphtheritic
 Gonorrhœal
 Tubercular

266. Injected or Blood-shot

Arsenical-poisoning
 Coryza

***Conjunctivitis**

Facial Paralysis
 Foreign Body
 Hooping Cough, *i.*
 Hay Fever
 Influenza
 Irritating Gases
 Iodism
 Measles
 Meningitis simplex
 Neuralgia of Fifth Nerve

267. Ecchymosed

Blows
 Epilepsy
 Hooping Cough
 Straining or Vomiting

EYEBALLS

268. Fixed

Epilepsy, *i.*
 Exophthalmic Goitre
 Ophthalmoplegia ex-
 terna
 Petit Mal

**269. Nystagmus (Oscillat-
ing)**

Albinism
 Ataxic Paraplegia
 Convulsions
 Congenital Cataract
 Disseminated Sclerosis
 Friedreich's Disease
 Hereditary Cerebellar
 Ataxia
 Multiple Neuritis
 Miner's Nystagmus
 (coal gas)
 Opacities of Cornea
 Progressive Muscular
 Atrophy
 Post-epilepsy
 Primary Spastic Para-
 lysis
 Retinal and Choroidal
 Affections
 Spasmus nutans
 Syringomyelia
 Tumours of Brain

270. Bright

Belladonna-poisoning
 Delirium

EYEBALLS—*continued*

Flushed Face (see 226)

Exophthalmic Goitre

Hyperæmia of Brain

Hypertrophy of Heart

Mania

Pleurisy, Acute

Pyrexia (see 831)

271. Protruding (Exophthalmos)

Aneurysm of Orbit

Asthma, Spasmodic

Apoplexy

Convulsions

Dyspnœa (see 725)

Delirium Tremens

Distension of Frontal Sinus

Epilepsy

Exostosis of Orbit

*Exophthalmic Goitre

Encephaloid

Glioma

Hydatids of Orbit

Hydrocephalus

Hypertrophy of Heart

Lachrymal Gland, Enlarged

Thrombosis of Superior Longitudinal Sinus

Tumour of Antrum

272. Sunken

Atrophy of Eyeball

Collapse (see 142)

Cancerous Cachexia

Cholera

Diarrhœa

Dysentery

Diabetes

Enteric Fever

Facial Hemiatrophy

one only

Hæmorrhage

Phthisis

Wasting Diseases (see 173)

273. Enlarged Orbit

Abscess

Aneurysm

Cancer

Exostosis

Hydatids

Lachrymal Gland, Enlarged

274. Strabismus (Squint)

Diphtheritic Paralysis

Flatulence (Infants)
temporary

Gout (x)

Hydrocephalus

Hæmorrhage, Cerebral

Hooping Cough

Hypermetropia
period

Locomotor Ataxy

Lesion of Pons

double convergent

STRABISMUS—continued

Ophthalmoplegia ex-
terna
divergent

Paralysis of Third Nerve
(746)
external

Paralysis of Sixth Nerve
(749)
internal

Spasm of Muscles

Syphilitic Deposits

Trigeminal Neuralgia (s)

Tumour of Brain

Tubercular Meningitis

275. Arcus Senilis

of little value

Atheroma

Arterio-sclerosis

Fatty Degeneration of
Heart

276. Keratitis (Inflammation of Cornea)

Diabetes

Exophthalmic Goitre

Meningitis

Paralysis of Fifth Nerve

Syphilis, Hereditary
interstitial

Starvation

Tuberculosis

**276a. Corneal Reflex
Abolished**

Coma (see 28)

PUPILS DILATED**277. One**

Aneurysm of Aorta

Aneurysm of Innominate

Cataract

Choroid Disease

Glaucoma

General Paralysis

Paralysis of Third Nerve

Tubercular Meningitis

Tumour of Neck

Tumour of Brain

278. Both (Mydriasis)

Amaurosis

Anæmia

Asphyxia

Acute Yellow Atrophy

Anæmia of Brain, II.

Alcoholic Coma

Apoplexy (profound)

Concussion of Brain

Diphtheritic Paralysis

Dyspnœa

Dementia, Acute Primary

Epilepsy, II.

Glaucoma

Hydrocephalus

Melancholia

Myelitis, Acute
cervical portion

Meningitis simplex, II.

274-278

PUPILS—*continued*

Meningitis, Tubercular,
II.

Nausea

Nitrous Oxide

Ptomainism

Poisoning by

Belladonna

Aconite, II.

Conium

Chloroform

Chloral

Cyanides

Hyoseyamus

Stramonium

Tobacco

Syncope

Sunstroke, II.

Stupor

Trance

Thrombosis, Cerebral

PUPILS CONTRACTED

279. One

Aneurysm of Aorta (s)

Amaurosis of Spinal
Origin

General Paralysis

Locomotor Ataxy

Migraine

Paralysis of Sympa-
thetic

Tumour of Neck

280. Both (Myosis)

Anæmia of Brain, I.

Apoplexy (u)

Cerebral Irritation

Concussion of Brain, III.

Compression of Brain, I.

Caries, Cervical

Delirium Tremens

Hæmorrhage into Pons

Hæmatoma of Dura

Mater

Iritis (adhesions)

Locomotor Ataxy

Meningitis, I.

Meningitis, Cerebro-
spinal

Morphinism

Mania

Photophobia (see 155)

Retinitis

Sunstroke, I.

Sleep, Healthy

Tubercular Meningitis

Poisoning by

Aconite, I.

Opium

Physostigma

**281. Pupils Sluggish or
Irresponsive to Light
(Light-reflex)**

Asphyxia

Apoplexy

Atrophy of Brain

PUPILS—continued

Coma (see 28)
 Cerebral Tumour
 Compression of Brain
 Epilepsy, II.
 Hysteria (s)
 Hydrocephalus
 Hydrocephalus Spur-
 ious
 Meningitis, II.
 Ophthalmoplegia in-
 terna
 Optic Atrophy (292)
 Optic Neuritis (see 291)
 Tumour of Brain

281a. Cutaneous Pupil-reflex**Lost**

Cervical Cord Lesion
 Cervical Sympathetic
 Lesion
 General Paralysis
 Locomotor Ataxy

282. Hippus

Rhythmical oscillation
 of pupil independently
 of respiration
 General Paralysis
 Spasmus nutans

283. Wernicke's Sign

The pupil reacts when
 the light falls upon the
 blind part of the retina

Hemianopsia

that form due to a lesion
 on the *proximal* side of
 the primary optic ganglia

284. Paralysis of Accommodation (Accommodation-reflex)

Atropine
 Blow on Eyeball
 Diphtheritic Paralysis
 Diabetes
 Exposure to Cold
 Influenza
 Neuritis
 Paralysis of Third Nerve
 Syphilis

285. Argyll-Robertson Pupil

The pupils react to accom-
 modulation but not to light

Ataxic Paraplegia
 Choroiditis
 Diabetic Sclerosis
 *General Paralysis of
 Insane
 Hemiplegia (x)
 *Locomotor Ataxy
 Lead-poisoning
 Ophthalmoplegia,
 Nuclear
 Progressive Muscular
 Atrophy
 Syphilitic Meningitis
 Photophobia

(See *Vision*, 155)

281-285

286. Tension

Degrees expressed by +
or -1, 2, or 3

287. Increased or T+

Glaucoma

288. Diminished or T-

Detached Retina
Loss of Vitreous
Humour

**289. OPHTHALMOSCOPIC
APPEARANCES****290. Retinal Hæmor-
rhages**

Arterio-sclerosis
Ague
Amyloid Kidney (x)
*Cirrhosis of Kidney
Endocarditis, Ulcera-
tive
Gout
Hæmophilia
Leucocythæmia
Malarial Fevers
Menses, Suppressed
Menopause
Nephritis, Chronic (s)
Pernicious Anæmia
flame-shaped
Purpura
Pyæmia
Scurvy
Syphilis

291. Optic Neuritis

Abscess of Brain
Amenorrhœa (x)
Aneurysm in Brain
Chlorosis
Caries of Sphenoid
Diphtheria
Exhaustion
Hydrocephalus
Hereditary Cerebellar
Ataxy
Lead-poisoning
Myelitis, Acute (x)
of cervical portion of cord
Meningitis, Syphilitic
Meningitis, Tubercular
Meningitis, Cerebro-
spinal
Meningitis, Traumatic
Node, Intracranial
Prolonged Lactation
Tumours of Brain
Tobacco Amaurosis (s)

292. Optic Atrophy

Choroiditis, Chronic
Glaucoma
General Paralysis
Hydrocephalus
Hereditary Cerebellar
Ataxy
Intra-ocular Hæmor-
rhage, n.
Locomotor Ataxy
10 per cent.

OPTIC ATROPHY—*cont.*

- Meningitis (s)
- Sclerosis, Disseminated (s)
- Tobacco Amaurosis (s)
- Tumour of Brain

293. Choked Disc

- Effusion at Base of Brain
- Leucocythæmia
- Syphilis
- Tumours of Brain

294. Cupped Disc

- Atrophy of Optic Nerve
- *Glaucoma
 - Beware of mistaking physiological cupping

295. Arterial Pulsation

- Aortic Regurgitation
- Exophthalmic Goitre
- Hypertrophy of Heart
- Hyperæmia of Brain

296. Exudative Choroiditis

- Cerebro-spinal Meningitis
- Syphilis

297. Tubercles on Choroid (?)

- Acute Miliary Tuberculosis
- Tubercular Meningitis

NOSE**298. Red**

- Alcoholism
- Amenorrhœa
- Dyspepsia
- Erysipelas
- (See *Erythema*; 197)

299. Butterfly Nose

- Lupus erythematosus

300. Saddle Nose

- Chronic Atrophic Rhinitis
- Syphilis

301. Bridgeless

- Adenoids
- Achondroplasia
- Injuries
- Imperfect Development
- Hereditary Syphilis

302. NOSTRILS**303. Collapsed**

- Adenoids
- Nasal Obstruction (305)

304. Dilating with Respiration

- Chiefly in children
- Capillary Bronchitis
- Collapse
- Dyspnœa, Acute (see 725)
- Diphtheritic Laryngitis
- Emphysæma
- Hay Fever

NOSTRILS—continued

Pneumonia, Acute
 Pneumonia, Lobular
 Pleurisy
 Spasmodic Asthma
 Tetanus neonatorum

305. Obstructed

Adenoids
 Abscess of Septum
 Coryza, I.
 Cyst, Middle Turbinate
 Deviation of Septum
 Diphtheria
 Exostosis
 Eczema Crusts
 Foreign Body
 Gummata
 u. on septum
 Glanders
 Hay Fever
 Hæmatoma of Septum
 Hypertrophic Rhinitis,
 Chronic
 Malignant Disease
 Membranous Rhinitis
 Osteoma
 Polypus
 Perichondritis of Septum
 Rhinoliths
 Syphilis
 Typhus (prodr.)
 Variola (prodr.)

305a. Large

Atrophic Rhinitis

306. RHINORRHEA**307. Watery or Mucous**

Bronchitis, I.
 Coryza
 Cerebro-spinal Fluid
 escape of
 Foreign Body
 Hay Fever
 Hooping Cough (invasion)
 Influenza
 Iodism
 Irritants
 Measles
 Rhinolith
 Spasmodic Asthma
 alternating with the
 paroxysms
 Neuralgia of Fifth Nerve
 Typhus, I.
 Worms

See also the next section : (early stage)

308. Purulent

Chronic Atrophic Rhinitis
 very offensive
 Cancer
 Caries of Ethmoid, etc.
 Diphtheria
 Empyæma of Antrum

RHINORRHOEA—continued

Empyæma of Frontal Sinus

Foreign Body

Gonorrhœa

Glanders

Hypertrophic Rhinitis, Chronic

Lupus

Membranous Rhinitis

Necrosis

Rhinolith

Syphilis

Scarlatina (sequela)

Tuberculosis

Ulceration

309. Blue

Bacillus pyocyaneus in Frontal Sinus

310. Nasal Regurgitation

Bulbar Paralysis

Cleft Palate

Diphtheritic Paralysis

Post-pharyngeal Abscess

Syphilitic Perforation

311. Epistaxis

Arterio-sclerosis

Anæmia

Arsenicism

Angeioma

Acute Yellow Atrophy

Aortic Insufficiency

Ague

Amenorrhœa

Barlow's Disease

Blows

Bronchial Glands, Enlarged

Bronchitis

Caries

Carcinoma of Nose

Chlorosis

Cirrhosis of Kidney

Cirrhosis of Liver

Diphtheria

Dengué

Dysentery

Enteric Fever

Emphysæma

Erysipelas

Exposure to Changes of Temperature

Fibroma of Nose

Foreign Body

Goitre

Hæmophilia

Hooping Cough

Hypertrophy of Heart

Hyperæmia of Brain

Leucocythæmia

Myxœdema

Measles

Mitral Stenosis

Ovarian Disease

Purpura hæmorrhagica

Peritonitis

EPISTAXIS—*continued*

Pleurisy
 Polypus
 Pyæmia
 Psittacosis
 Remittent Fever
 Relapsing Fever
 Rarefied Air
 Scurvy
 Scarlatina
 Sarcoma of Nose
 Tumours of Neck
 Thrombosis, Cerebral
 Tuberculosis
 Worms
 Ulcer of Nose

312. Gangrenous Tip of Nose

Frost-bite
 Raynaud's Disease
 Syphilis

313. Distension of Transverse Nasal Vein

Adenoids (Scanes Spicer)

314. Sneezing

Adenoids
 Asthma
 Coryza
 Chronic Hypertrophic Rhinitis
 Gout
 Hay Fever
 Hysteria

Iodism

Irritants—

Ipecacuanha
 Veratrum album
 Euphorbium
 Snuff
 Measles (invasion)
 Polypus
 Spur of Septum

MOUTH**315. Dribbling or Salivation**

Aphthæ
 Ague
 Adenoids
 Bulbar Paralysis
 Cancrum Oris
 Cancer of Stomach
 Cancer of Larynx
 Dementia
 Dentition
 Dilatation of Stomach
 Diphtheritic Paralysis
 Facial Paralysis
 Foreign Body in Mouth
 Glossitis
 Gastric Irritation
 Hysteria
 Hydrophobia
 Idiocy
 Iodism
 Liver Disorders
 Mumps

DRIBBLING—continued

Mental Emotion
 Neuralgia of Fifth Nerve
 Pregnancy
 Pancreatic Disease
 Poisoning by
 Aconite
 Antimony
 Chlorate of Potash
 Cantharides
 Mercury
 Quinsy
 Ranula
 Sprue
 Scurvy
 Syphilis
 Stomatitis
 Teeth, Jagged
 Typhus
 Ulcer of Mouth
 Ulcer of Stomach
 Variola
 Worms

316. Foam at Mouth

Apoplexy (late)
 *Epileptic Seizure
 Hystero-epileptic Seizure
 Malinger (soap?)
 Pulmonary Affections
 with Prostration

317. Attempts to Bite

Hydrophobia (early)
 Lyssaphobia (late)

318. Dry

Xerostoma

(See *Tongue*, 353)

319. Cold Breath

(See *Subnormal Temperature*)

320. Mouth Open

*Adenoids
 Asthma
 Bulbar Paralysis
 Cancrum Oris
 Dislocated Jaw
 Dyspnoea, Acute
 Glossitis
 Idiopathic Muscular
 Atrophy
 Obstructed Nostrils (see
 305)
 Post-pharyngeal
 Abscess
 Quinsy
 Stomatitis

321. Mouth Drawn to One Side

Hemiplegia
 Facial Paralysis, Old
 if dating from childhood,
 same side
 Facial Hemiatrophy
 Facial Hemihyper-
 trophy

* * Beware of unilateral loss
 of teeth!

322. LIPS**323. Pallid** (see *Anæmia*, 225)**324. Livid** (see *Face*, 233)**325. Swollen**

Adenoids

Abscess

Bites

Chancre

Cancrum Oris

Corrosive-poisoning

Epilepsy

Jagged Teeth

Stings

Stomatitis

Tuberculosis

Ulcer

Worms

326. Local Swelling

Cysts

Nævi

Epithelioma

327. Herpes Labialis

Ague (hot stage)

Coryza

Cerebro-spinal Meningitis

Irritation of Fifth Nerve

*Pneumonia, Acute

Remittent Fever

328. Fissures at Angles

Hereditary Syphilis

329. BUCCAL MEMBRANE**330. Sloughs**

Bites

Cancrum Oris

Corrosive-poisoning

Glanders

Sprue

331. Vesicles

Herpes

Varicella

Variola

332. Petechiæ

Hæmophilia

Purpura

Scurvy

333. Pigment Patches

Addison's Disease

Cirrhosis of Liver (s)

Cancer of Liver (x)

Ulcer of Stomach (x)

Health (x)

Common in Lascars and
some negro tribes**334. Köplik's Spots**Small bright red spots
with bluish-white speck
in centre; found also
inside lips

Measles

one or two days before
eruption

(See 173)

335. Gums**336. Spongy and Bleeding**

Barlow's Disease
 Cancrum Oris
 Diabetes
 Dyspepsia
 Gastric Irritation
 Leucocythæmia
 Mercurialism
 Phthisis
 Purpura
 Scurvy

337. Pale

Anæmia (see 225)
 Hæmorrhage
 Wasting Diseases (u)
 (173)

338. Coloured Line

Copper-poisoning
 green
 *Lead-poisoning
 blue
 Mercurialism
 bluish
 Scurvy
 purple
 Spongy Gums (see 336)
 red

339. Circumscribed Swelling

Actinomycosis
 Dental Abscess

Epulis
 Epithelioma

340. Sordes

Acute Yellow Atrophy
 Pneumonia
 Prostration (see 141)
 (with pyrexia)
 Typhic state (see 143)

TEETH

341. Grinding Teeth

Anæmia of Brain
 Chorea
 Epilepsy
 Gout
 Hydrocephalus
 Hyperæmia of Brain
 Intestinal Irritation
 Infantile Paralysis
 Rheumatism
 *Tubercular Meningitis
 Tumour of Brain
 Variola
 Worms

342. Carious Teeth (due chiefly to Leptothrix buccalis)

Diabetes
 Eructations, Acid
 Injuries
 Neglect
 Phosphorus-poisoning

343. Teeth Loose

Cancrum Oris
 Diabetes
 Mercurialism
 Purpura
 Phosphorus-poisoning
 Recession of Gums
 Scurvy
 Acute Wasting Diseases
 (173)

**344. Teeth Laminated
(permanent)**

History of Acute
 Disease in Childhood,
cf. Nails

345. DENTITION**346. Early**

Tubercular Diathesis
 Hereditary Syphilis

347. Late

Cretinism
 Malnutrition
 Rickets
 in irregular order

PERMANENT INCISORS**348. Dentated**

Struma
 While unopposed

**349. Notched and Conical
Hereditary Syphilis****PALATE****350. White**

Aphthæ
 Callosities
 Diphtheria
 Necrosis (early)
 Milk

351. Perforate

Cleft Palate
 Congenital (s)
 Injury
 Measles
 Syphilis
 Variola

JAW CLOSED

(see *Trismus*, 789)

TONGUE**352. Dry and Glazed**

Dysentery, Chronic
 Enteritis, Acute
 Gastritis, Erythematous
 Intestinal Obstruction
 Phthisis
 Peritonitis
 Wasting Diseases (see
 173)

353. Dry and Furred

Ague
 Continued Fevers
 Dyspepsia

DRY AND FURRED—cont

Erysipelas
 Exanthemata
 Hyperpyrexia
 Infective Endocarditis
 Jaundice
 Lead-poisoning
 Nasal Obstruction (see 305)
 Pyæmia
 Peritonitis
 Pneumonia
 Remittent Fever
 Typhus
 Tuberculosis, Acute
 Typhic state, 143
 'baked'

354. White Fur

Apoplexy
 Alcoholism
 Catarrh of Bile-ducts
 Cyanotic Liver
 Catarrh of Mouth
 Colitis
 Constipation
 Duodenal Catarrh
 Delirium Tremens
 Erysipelas
 Enteric Fever, I.
 centre only
 Fæcal Accumulation
 Gout
 Gastritis, Chronic
 Gastritis, Acute

Gastric Irritation
 Hepatitis, Acute
 Hepatic Abscess
 Lithæmia
 Migraine
 Meningitis, Simple
 Measles
 centre only
 Pyrexia (see 831)
 Pneumonia, Acute
 Phthisis
 Quinsy
 Rheumatism
 Relapsing Fever
 Remittent Fever
 Scarlatina, I.
 centre only

Typhus

Tonsillitis

Tuberculosis, Acute
 centre only

* * Malingerers use chalk
 (test with acid)

355. Brown Fur

Erysipelas (severe)
 Enteric (third week)
 Gout (s)
 Gastritis, Chronic (s)
 Jaundice (see 230)
 Remittent Fever
 Scurvy
 Septicæmia
 Strangulated Hernia
 Acute Tuberculosis, II.

353-355

BROWN FUR—continued

Typhus

Typhic state (see 143)

* * Beware of brown stains, *e.g.*
liquorice or chocolate**356. Large, Pale, and Indented**

(Anæmic type)

Anæmia (see 225)

Atony of Stomach

Acromegaly

Cancer of Stomach

Gastritis, Chronic

in weakly people

Mucous Disease

slimy

Neurasthenia

Œdema

Relapsing Fever

Salivation

Ulcer of Stomach

357. Swollen and Red

Aneurysm of Aorta

Cretinism

Carcinoma

Glossitis

Irritant Poisons

Mitral Disease

Mongolian Imbecility

Pemphigus

Urticaria

Variola

358. 'Strawberry'

Ichthyosis Linguae

*Scarlatina

359. Plaques or Psoriasis Syphilis**360. Smooth and Moist Hyperacidity****361. Black**

Iron or Bismuth

362. Small

Bulbar Paralysis

if double

Enteric Fever

Gastritis, Chronic

Hæmorrhage

Paralysis of Hypo-
glossals

Peritonitis, Acute

Typhic state

363. Fissured

Diabetes

Dysentery, Chronic

Erysipelas (severe)

Scars of Ulcers

Syphilis

* * Sometimes normal

364. Ulcerated

Aphthæ

Chancre

Epithelioma

Gastritis (s)

Jagged Tooth

ULCERATED—continued

Sprue (under-surface)

Syphilis

secondary and tertiary

365. Bitten

Epilepsy

Fall

Hystero-epilepsy

366. Nodules

Actinomycosis

Concretions (?)

367. Trembling

*Alcoholism

Bulbar Paralysis

Bromism

Chorea

jerking

Delirium Tremens

Friedreich's Disease

jerking

General Paralysis

Paralysis agitans

Sclerosis, Disseminated

Typhic state (see 143)

368. Unilateral Furring

Inability to bite on that side

369. Unilateral Protrusion

Apoplexy

Bulbar Paralysis

Caries of Upper Cervical
Vertebræ

Cerebral Embolism

Facial Paralysis (s)

Hemiplegia (see 761)

Syringomyelia

Tumour of Brain or of
upper part of Cord**370. Inability to Protrude**

(Bilateral Paralysis)

Bulbar Paralysis

(Double)

Diphtheritic Paralysis

General Paralysis of
InsaneLesion of Hypoglossal
Nucleus**FAUCES****371. Reddened**

Belladonna-poisoning

Coryza

Diphtheria, i.

Erysipelas

Gastritis

Irritant-poisoning

Iodism

Influenza

Mediastinal Abscess

Measles

Pharyngitis, Acute

Pharyngitis, Chronic
rough

Quinsy

Roseola

Rötheln

Relapsing Fever

Scarlatina

dark red

364-371

REDDENED—continued

Tetanus

*Tonsillitis, Simple

Tonsillitis, Gouty

Tonsillitis, Rheumatic

372. Swollen

Amyloid

Dengué

Erysipelas

Measles

Mumps

Pharyngitis, Acute

Pharyngitis, Follicular

Hypertrophied Tonsils

Quinsy

*Tonsillitis, Simple

Tonsillitis, Rheumatic

Tonsillitis, Septic

Variola

373. White Patches

Diphtheria

fixed

Follicular Pharyngitis

detachable

Gangrenous Sore

Throat, I.

Membranous Pharyn-
gitis

Scarlatina maligna

Septic Sore Throat

* * Beware of mucus and
cream**374. Ulceration of Tonsils**

Diphtheria

after separation of
membrane

Glanders

bluish

Scarlatina (x)

Syphilis

or plaques

Septic Sore Throat

after separation of sloughs

Tonsillitis

Tubercular Pharyngitis

375. Bulging of Pharynx

Adenoids

Cancer

Caries of Cervical
Vertebrae

Epithelioma

Post-pharyngeal Ab-
scess

Tumours

376. Vesicles

Herpes

Varicella

Variola

**377. Mucous Accumula-
tion**

Alcoholism

Glanders

Lithæmia

Naso-pharyngeal

Catarrh

Pharyngitis, Acute, II.

371-377

MUCOUS ACCUMULATION— *continued*

Pharyngitis, Follicular
Relapsing Fever
Scarlatina (s)

378. Deviating Uvula

Often normal
Facial Paralysis
Relaxed Uvula
Syphilis (Fixed)

LARYNX

379. Ulcer

Cancer
u. solitary
Laryngitis, Chronic (x)
Syphilis
deep, with sharply defined
edges, multiple, some
cicatrised, mucous mem-
brane red

Tubercle

shallow, with ill-defined
edges, esp. about
arytenoid cartilage and
epiglottis; mucous
membrane pale

380. Stenosis

Cancer
Foreign Body, Impacted
Growths, Innocent
Lupus
Leprosy
Laryngitis
simple, or in connection
with diphtheria, ty-
phoid, variola, etc.

Perichondritis, Acute
Paralysis of Abductors
Bilateral
Scars
Tertiary Syphilis
Tuberculosis

381. Growths

Angæioma
bleeding
Cancer
u. posterior part of larynx
Cysts
Fibroma
Polypus
Papilloma
Sarcoma

382. Laryngismus

Epilepsy
Foreign Body
Growths
Laryngismus stridu-
losus
Mediastinal Tumour
Œdema Laryngis

383. Swelling of Mucous Membrane

Diphtheria
Laryngitis
Laryngitis, Tubercular
(pale)
Œdema Laryngis
Perichondritis
Tertiary Syphilis

384. PARALYSIS**Bilateral Adductor**

Hysteria

Menopause

Menses, Suppressed

Crico-thyroid (Symptomatic)

Locomotor Ataxy

Syringomyelia

385. Redness of Vocal Cords

Catarrh

Laryngitis, Acute

Laryngitis, Chronic patches

Tumours, etc.

irritation of

(See *Dyspnœa*, 725 ;
Dysphagia, 170 ;
Voice, 808 ; *Cough*,
 819)

NECK**Stiff**

Atlanto-axial Disease

Ankylosis of Spine

Caries of Cervical Vertebrae

Carbuncles or Boils

General Paralysis

Glandular Fever

Myositis ossificans

Post-pharyngeal

Abscess

Polymyositis

Rheumatism

Sprain

Spinal Meningitis

Spinal Tumour

Spinal Meningeal Hæmorrhage

Tetanus

Torticollis

(See 217)

387. Wry (Torticollis)

Congenital Affection

Contraction of Scars

Caries

Hysteria

'Spasmodic Torticollis'

Tumour of Middle Cerebellar Peduncle

Worms (reflex)

* * 'No such thing as
 paralytic torticollis'
 (Gowers)

388. Retracted(See *Head*, 219)**389. Displacement of Trachea**

Aneurysm of Innominate

to left

Lymphadenoma

Mediastinal Tumours

when large

390. 'Tracheal Tug'

The chin should be raised
in order to see this

*Aneurysm of Trans-
verse Aorta

Cancerous Bronchial
Glands

Dilatation of Aorta (s)

**391. Tumefaction above
Clavicles**

Emphysæma
increased on coughing

Myxœdema

**392. Swelling in Sterno-
mastoid**

Gumma

Hæmatoma (Infants)

esp. after breech presenta-
tions

**393. Prominent Sterno-
mastoids**

Asthma

Bronchitis, Chronic

Emphysæma

Chronic Dyspnœa in
general (725)

**394. Inspiratory Descent
of Pomum Adami**

Collapse of Lung

Contraction of large
Vomica

Consolidation, Exten-
sive

Diphtheritic Laryngitis

Œdema Laryngis

Obstruction in Air-
passages

395. Throbbing Carotids

Anæmia

Aortic Regurgitation

Ague (hot stage)

Exophthalmic Goitre

Hæmorrhage, Profuse

Hyperæmia of Brain

Obliterated Desc. Aorta

Pyrexia

to some extent

396. Distended Jugular

Aneurysm

esp. intra-pericardial

Capillary Bronchitis

Dilatation of Heart

increased by compressing
liver

Dyspnœa, Acute (see
725)

Mediastinal Tumour

Œdema of Lungs

Pericardium, Adherent

collapsing with diastole

Post-pharyngeal Ab-
scess

397. Jugular Vein Empty

Thrombosis of Lateral
Sinus

398. Pulsating Veins

Best seen on right side

Anæmia

PULSATING VEINS—*cont.*

- Aortic Stenosis (late)
- Aortic Regurgitation (late)
- Aortic Aneurysm
 - when communicating with superior vena cava
- Chlorosis
- Dilatation of Heart
- Hypertrophy of Right Ventricle
- Mitral Stenosis
- Malformation of Heart
- Tricuspid Regurgitation systolic
- Tricuspid Stenosis
 - erect position only—præ-systolic

399. Branchial Fistula (Congenital)

A fine opening just above sterno-clavicular articulation or else on a level with the top of the thyroid cartilage

400. Enlarged Parotid

- Cancer
- Cholera
- Dysentery
- Exanthemata (s)
- *Mumps
- Orchitis
- Septicæmia
- Tumour

here is also a lymphatic gland here. Its vessels come from the upper

pharynx, the nasal fossæ, and the frontal and parietal scalp

401. Enlarged Sub-maxillary Glands

They receive the lymphatics from the skin of face and neck, the lower lip, buccal cavity, lower gums, and front of tongue

- Actinomycosis
- Carious Lower Teeth
- Cancer of Mouth
 - or of above area
- Diphtheria
- Irritation within above area

Mumps

Roseola

Syphilis

Stomatitis

Symmetrical Adenolipomatosis

The suprahyoid glands also receive lymphatics from front of tongue and lower lip

401 bis. Enlarged Cervical Glands

The lymphatics of the skin of the face and neck and of the external ear and scalp go to the superficial set; those of the buccal cavity, root of tongue, tonsils, palate, pharynx, larynx, orbit, and nasal fossæ to the deep set

ENLARGED GLANDS—cont.

Cancer of above area.
 Diphtheria
 Eczema
 Erysipelas
 Glandular Fever
 Glanders
 Hooping Cough
 Irritation within above area
 Lymphadenoma
 Leucocythæmia
 Mucous Disease
 Measles
 Post-pharyngeal Abscess
 Phthisis
 Perichondritis syphil-
 itica
 Quinsy
 Roseola
 Rötheln
 Syphilis
 Scarlatina
 Tubercle
 Varicella
 Variola

402. Enlarged Occipital Glands

The lymphatics of the posterior portion of the scalp terminate here

Eczema Capitis
 Irritation within the above area

Leucocythæmia
 Lymphadenoma
 Rötheln
 Symmetrical Adeno-
 lipomatosis
 Syphilis
 Tubercle

403. Thyroid Enlarged

Acromegaly (s)
 Aneurysm
 Cancer of Thyroid
 Cysts
 Calculus of Thyroid
 Exophthalmic Goitre
 unequal—pulsating
 Lymphadenoma and other
 tumours of neck—from
 pressure on veins

404. Thyroid, Shrunken

Acromegaly (s)
 Cretinism
 Myxœdema

405. Swellings in Neck (Unclassified)

Abscess
 Aneurysm
 Dermoid Cysts
 Œsophageal Pouch
 Sarcoma

(See 392)

CHEST**406. Flat**

Progressive Muscular
 Atrophy

401 bis—406

FLAT—continued

Predisposition to
Phthisis

407. Pterygoid

(Projecting Shoulder-
blades)

Cyphosis (see 441)

Predisposition to
Phthisis

408. Pigeon-Breast

Generally due to interfer-
ence with lung expan-
sion in childhood.

Adenoids

Catarrhs, Repeated

Hooping Cough

Rickets

Tonsils, Enlargement of

**409. Zonal Constriction
(Harrison's Sulcus)**

History of repeated
catarrhs or of other
impediments to inspira-
tion especially in rickety
subjects with prominent
abdomens

410. Barrel-Shaped

Emphysæma

411. Angulus Ludovici

Apex at manubrio-sternal
joint

Emphysæma

412. Rosary

Knobby Enlargement
of Costal Epiphyses

Barlow's Disease

Rickets

413. BULGING

The shape of the chest
best ascertained by Dr.
Gee's cyrtometer.

414. Of Entire Side

Cirrhosis of Lung
sound side

Empyæma

Hæmothorax

Infiltrated Cancer of
Lung

Pleural Effusion

semi-cylindrical

Pneumothorax

Pleura, Cancer of

415. Circumscribed Bulging

Aneurysm of Ascend-
ing Aorta

intra-pericardial, right
nipple

extra-pericardial, fourth
right cartilage

Aneurysm of Trans-
verse Portion

above left clavicle

Caries of Sternum

Encysted Pleurisy

Empyæma, Pointing

'E. necessitatis'

Hydatids of Lung

Hernia of Lung

Mediastinal Tumour or
Abscess

BULGING—*continued*

Necrosis of Ribs
 Osteomyelitis of Ribs
 sequel of enteric
 Rickets (x)
 Tumour of Chest-wall
 Tubercle of Ribs

(See 862)

416. Præcordial Bulging

Aortic Stenosis
 Aortic Regurgitation (s)
 Acromegaly
 inferior sternal
 Dilatation of Heart
 Exophthalmic Goitre
 Hypertrophy of Heart
 Malformation of Heart
 Mitral Stenosis (slight)
 Mediastinal Tumour
 Pyopericardium (s)
 Pericardial Effusion (s)
 Pneumopericardium

417. Bulging of Right Hypochondrium

Abscess, Hepatic
 Enlarged Liver (see 832)
 Hydatids
 Pleural Effusion (rt.)

418. Circumscribed Œdema

Abscess
 Aneurysm

Caries
 Empyæma
 Hysteria
 Intrathoracic Tumour

419. SHRINKING**420. Of Entire Side**

The left side is normally smaller than the right

Aneurysm
 if occluding bronchus
 Collapse of one Lung
 Cirrhosis of Lung, II.
 contraction
 Empyæma (x)
 Infiltrated Cancer of Lung (s)
 with collapse of air-cells
 Mediastinal Tumour
 if occluding bronchus
 Pleurisy, Old
 Pyopneumothorax (x)
 Shrinking may be simulated by scoliosis or by enlargement of the opposite side

421. Foveated

Lower sternal region
 Adenoids
 Enlarged Tonsils
 Nasopharyngeal Growths
 Pericardial Adhesion
 Pleurisy, Old Double
 Rickets

415-421

422. 'Trichter Brust' (Funnel chest)

Common in shoemakers from the pressure of the last

423. Local Flattening

Bronchiectasis

Collapse of Lung

Contraction of Vomica

Phthisis (infra-clavicular)

INTERSPACES**424. Bulging**

Emphyæma, I.

Hydrothorax

Hæmothorax (s)

Hydatids of Lung

Mediastinal Tumours

Pneumothorax

Pleurisy with Effusion

425. Retracted with Inspiration

Asthma, Spasmodic

Cancer of Larynx

Cirrhosis of Lung

Capillary Bronchitis

Diphtheritic Laryngitis

Collapse of Lung

Emphyæma

Foreign Body in Air-passages

Occlusion of Bronchus

Edema Laryngis

426. Præcordial Retraction

Aortic Regurgitation

systolic—from atmospheric pressure

Mitral Stenosis

diastolic

Pericardial Adhesion

systolic — apex, xiphoid cartilage, and epigastrium

Retraction of Lung

atmospheric

427. Systolic Retraction of Lower Ribs

(J. Broadbent)

Pericardium Adherent to Diaphragm

428. Diaphragm Phenomenon Absent

Emphyæma

Pleuritic Adhesions

Pleuritic Effusion

Pneumothorax

429. Impaired Mobility

Bronchus, Occluded

Cirrhosis of Lung

Cancer of Lung

Emphyæma

Epilepsy (both sides)

Fractured Ribs

Hydrothorax

Intercostal Neuralgia

Intercostal Rheumatism

IMPAIRED MOBILITY—*continued*

Liver, Great Enlargement of

Mediastinal Tumour

Pneumonic Consolidation

Pleurisy with Effusion

Pleurisy, Acute

Pneumothorax

Phthisis

esp. under clavicle

Paralysis of Respiratory Muscles

Adherent Pericardium

Spasm of Respiratory Muscles

Spasm of Glottis

Strychnine-poisoning

Tetanus

430. Enlarged Veins of Chest

Cancer of Breast

Dilatation of Heart

Lactation

Mitral Regurgitation (late)

Mediastinal Tumour
flow usually downwardsPortal Obstruction or
Thrombosis
flow upwards**MAMMA****431. Milk in Breasts**

Ectopic Gestation

Lactation

Ovarian Cysts

Pregnancy

Not uncommon in newborn infants, male and female

432. Pigmentation around Nipples

Ectopic Gestation

Ovarian Cyst

Pregnancy

433. Paget's Disease

Forerunner of cancer

CHARACTERS OF ASPIRATED FLUID, ETC.**434. Air**

Pneumothorax

Puncture of Lung
bubbles

Decomposition (?)

435. Serum

Hydrothorax

sp. g. under 1015, little or no albumen

Acute Pleurisy or Pericarditis

sp. g. over 1017, highly albuminous

Hydatids

hooklets

Cancer of Pleura or
Cancer of Lung

'prune-juice' or greenish-brown, but may be clear

ASPIRATED FLUID—*cont.***436. Pus**

Actinomycosis

with yellow seed-like
bodies

Abscess of Lung

bursting into pleural
cavity

*Empyæma

Septicæmia

437. Blood

Aneurysm

Encephaloid Lung

*Hæmothorax

Tubercular Pleurisy (s)

438. Putrid

Gangrene of Lung

BACK AND SPINE**439. LUMBAR PARA-
CENTESIS**

Hydrocephalus

Meningitis

much albumen, little or no
sugar; bacillus

Purulent Meningitis

Tumour of Brain

sugar, but little albumen

440. Stiffness

Ankylosis of Spine

Caries of Vertebrae

*Lumbago

Rheumatism

Spinal Tumour

'Spondylose rhizomé-
lique'

Spinal Meningitis

CURVATURE**441. Anterior (Cyphosis)**

Adenoids (slight)

Acromegaly

Emphysæma

Mollities Ossium

Osteitis deformans

Occupation :

Tailors

Shoemakers

Gardeners

Porters

Paralysis of Insane,
GeneralProgressive Muscular
Atrophy

Rheumatism

Rheumatoid Arthritis

Rickets

disappears when the child
is lifted from the arms'Spondylose rhizomé-
lique' (Marie)**442. Posterior (Lordosis)**

Ascites

Abdominal Tumours

Cretinism

Congenital Dislocation
of both Hips

Coxa vara (double)

LORDOSIS—*continued*

Cerebro-spinal Meningitis

Idiopathic Muscular Atrophy

Osteitis deformans

Poliomyelitis, Anterior

Pseudo-hypertrophic Paralysis

Progressive Muscular Atrophy (x)

Pregnancy

Rheumatism

Rheumatoid Arthritis

443. Lateral (Scoliosis)

Anæmia

Collapse of one Lung
cirrhosis, old pleurisy

Friedreich's Disease

Hip Disease

Infantile Paralysis

Mollities Ossium

Rickets

Syringomyelia

dorso-lumbar region, convexity to left

444. Angular

Aneurysm of Desc. Aorta

* Caries of Spine

Mollities Ossium

Spinal Tumour

* * Beware of mistaking spina bifida

445. Rotary Twist

Disease of Cerebellar Peduncles

The twist is also commonly associated with lateral curvature

446. Lumbar Prominence

(one side)

Hydronephrosis

Hydatids of Kidney

Pyonephrosis

Perinephritis

Post-renal Extravasation

Renal Cancer

447. Œdema, Lumbar

Perinephritis

Purulent Spinal Pachymeningitis
livid**ABDOMEN****448. Prominent**Abdominal Tumours
(see 881)

Ascites

smooth with dependent bulge

Amyloid

Appendicitis

Cretinism

Colloid Omentum

Cirrhosis, Hypertrophic

442-448

PROMINENT—*continued*

Congenital Dislocation
of Hips

Dilatation of Stomach
towards umbilicus and left
side

Distended Bladder
sometimes enormous in
women

Enteroptosis (pendu-
lous)

Enteric Fever

Fatty Omentum

Flatus

Hydronephrosis

Hydatids (large)

Intestinal Obstruction

Intussusception

Irritant-poisoning

Kidney, Large Cystic

Leucocythæmia
splenic variety

Meteorism

Ovarian Disease

Peritonitis
esp. tubercular

Pneumoperitonæum

Pancreatic Disease

Phantom Tumour

Pseudo-hypertrophic
Paralysis

Pregnancy

Rickets

Retention of Menses

Syphilitic Liver

Tabes mesenterica

Uterine Fibroid

449. Retracted

Cholera

Diarrhœa of Large
Intestine

Lead Colic

Cerebro-spinal. Menin-
gitis

Simple Meningitis

Tubercular Meningitis
boat-shaped abdomen

Peritoneal Adhesions

Stricture of Œsophagus

Tumours of Brain

Wasting Diseases (see
173)

**450. Retraction with In-
spiration**

Asthma, Spasmodic

Capillary Bronchitis

Diphtheritic Laryngitis

Foreign Body in Air-
passages

Large Pleural Effusion

*Paralysis of Diaphragm

**451. Enlarged Superficial
Veins**

Ascites (late)

Cirrhosis of Liver

Dilatation of Stomach

Mediastinal Tumours

Portal Obstruction
current upwards

ENLARGED VEINS—cont.

Vena Cava Superior,
Obstruction in
current downwards
Tumours of Liver

452. Caput Medusæ

(Enlarged Veins about
Navel)
Portal Obstruction

453. Visible Peristalsis

Right to left = Colon
Left to right = Stomach
Diarrhœa, Profuse
Dilatation of Stomach
Dilatation of Colon,
Congenital
Intestinal Obstruction
Peritonitis, Old
Stricture of Pylorus

UMBILICUS

454. Retracted

Obesity

455. Stretched

Ascites
Colloid Omentum
Ovarian Tumours
Pregnancy till 7th
Month

456. Projecting

Portal Obstruction
Pregnancy after 7th
Month
Umbilical Hernia

**457. Oozing of a little
Clear Fluid**

Congenital Umbilical
Fistula

458. Tache Cérébrale

Tubercular Meningitis
Internal Spinal Menin-
gitis
General Paralysis of
Insane

Typhic state (143)

It is present in general
when the skin is inelastic
(see 193)

**CHARACTER OF ASPIRATED
FLUID**

459. Gelatinous

Colloid

460. Coagulable

Ascites
unaffected by acetic acid
Ovarian Cyst
made clear by boiling
with twice its volume of
strong acetic acid

461. Hæmorrhagic

Cancer
u. of omentum
Tubercular Peritonitis
(s)

462. Chylous

Obstruction of Thoracic
Duct
Rupture of Thoracic
Duct

ASPIRATED FLUID—*cont.***463. Milky** (not chylous)

Fatty Degeneration of
endothelial or cancer
cells

463a. Glycogenic (turns
starch into sugar)

Pancreatic Cyst

464. Swollen Perinæum

Extravasation of Urine
Ischio-rectal Abscess
Perinæal Abscess
Testis in Perinæum

465. Swelling about Groin

Abscess, Glandular
Abscess, Psoas
Abscess, Iliac
Aneurysm
Bubo (= venereal ab-
scess)
Carcinoma
Cysts
Dislocation of Hip
Glands (see next section)
Hip Disease
Hernia, Inguinal
Hernia, Femoral
Hernia, Obturator
Hydrocele of the Sac
Hæmatocele of the
Cord
Rider's Bone
Sarcoma
Undescended Testis

**466. Enlarged Inguinal
Glands**

They draw their lymphatic
vessels from the lower
limb, the buttock, peri-
næum, external genitals,
and the lower half of the
abdomen

Irritation within the
above area, or sys-
temic conditions

Abrasions

Burns

Boils

Balanitis

Chancre

Gonorrhœa

Glandular Fever

Lymphadenoma

Plague

Symmetrical Adeno-
lipomatosis

Sepsis

Tubercle

Varicose Gland (filarial)

LIMBS**467. Swellings of Bone**

Achondroplasia (epi-
physes)

Acromegaly

'Aneurysm of Bone'

Barlow's Disease

Cysts

Cancer

SWELLINGS OF BONE—
continued

Exostosis
 Enchondroma
 Erectile Tumours
 Hydatids
 Myeloid
 Osteitis
 Osteomyelitis
 Periostitis
 Rickets (epiphysis)
 Rheumatoid Arthritis
 Scurvy
 Tubercle

468. Nodes

Exostosis
 Erythema nodosum
 Scurvy
 Syphilis

469. Subcutaneous

Nodules

Chorea
 Periarteritis nodosa
 Rheumatism in System
 (near a joint)

470. NÉLATON'S LINE

(Anterior Superior Spine
 to Tuber Ischii)

**471. Trochanter Displaced
 Above**

Congenital Hip Dislocation
 Coxa vara

**Dislocation on Dorsum
 Ilii**

Fracture of Neck of
 Femur
 extra-capsular

472. Leg Lengthened

Dislocation of Hip
 downwards
 Hip Disease, I. (?)
 Sacro-iliac Disease

473. Leg Shortened

Achondroplasia
 Cretinism
 Coxa vara
 Dislocation of Hip
 upwards
 Congenital Dislocation
 of Hip upwards
 Fractured Femur or
 Tibia
 old or recent
 Hip Disease
 Infantile Paralysis, Old
 Infantile Hemiplegia,
 Old
 Osteo-myelitis, Old.

474. False Shortening

Obliquity of pelvis
 Hysteria
 Lateral Curvature
 Pelvic Cellulitis

475. Leg Curved

Achondroplasia
 Cretinism

LEG CURVED—*continued*

Mollities Ossium
 distorted
 Osteo-myelitis, Old
 Osteitis deformans
 Rickets (see *Knees*)
 Syphilis, Hereditary
 ('Sabre-blade Shin')

476. Scissor - Legs or Crossed-Leg Deformity

Ankylosis in Double Hip Disease
 Double Coxa vara
 Spastic Cerebral Paraplegia

477. Feet Enlarged

Acromegaly
 Pulmonary Osteo-arthropathy

478. Pes Arcuatus vel Cavus

Chorea (x)
 *Friedreich's Disease
 Infantile Paralysis (s)
 Spastic Paraplegia

478a. Claw Foot (as above, but wasted)

Friedreich's Disease
 Pseudo-hypertrophic Paralysis (s)
 Talipes equinus
 Talipes equino-varus

479. Toe Swollen

Abscess
 Bunion
 Cellulitis
 Chilblains
 Erysipelas
 Gout
 Rheumatoid Arthritis

480. Poplitæal Space

The glands receive the deep lymphatics of the leg

Abscess
 under fascia
 Aneurysm
 Bursæ
 that under the semi-membranosus communicates with the knee-joint
 Enlarged Glands

481. Œdema of Leg or Foot

Aneurysm, Poplitæal
 Aneurysm, Abdominal
 Acute Ascending Paralysis
 Anæmia
 Abdominal Tumours
 Anasarca (see 191)
 Beri-beri (shins)
 Cellulitis
 Cirrhosis of Kidney
 Cirrhosis of Lung
 Dissecting Aneurysm
 Dilatation of Heart
 Erysipelas
 Erythema nodosum

ŒDEMA OF LEG—cont.

Exophthalmic Goitre
 Emphysæma
 Fatty Degeneration of
 Heart (s)
 Gout
 Hæmorrhage, Profuse
 Mitral Disease
 Menorrhagia
 Nephritis
 Osteomyelitis
 Periostitis
 Peritonitis, Chronic
 Pregnancy
 Phlegmasia Alba Dolens
 u. left leg
 Phthisis, II.
 Pernicious Anæmia
 Phlebitis
 Scurvy
 Tuberculosis
 Trichinosis
 Urticaria
 Varicose Veins
 deep or superficial

482. Perforating Ulcer of Foot

Locomotor Ataxy
 Syphilis
 Leprosy

483. Gangrene and Phalangeal Necrosis

Arterio-sclerosis
 Beri-beri

Burns
 Diabetes
 Embolism
 Ergotism
 Frostbite
 Glanders
 Hysteria
 Injuries
 Leprosy
 Morvan's Disease
 whitlows also
 Plague
 Raynaud's Disease
 symmetrical
 Syringomyelia
 whitlows also
 Snake-poison
 Thrombosis
 (See *Anasarca*, 191).

484. Œdema of Arm

Aneurysm of Aorta
 transverse
 Aneurysm of Innominate
 Aneurysm of Axillary
 Cellulitis
 Erysipelas
 Glands, Enlarged Axillary
 Hysterical Œdema
 (hands)—does not pit
 Mediastinal Tumour
 Thrombosis

481-484

ŒDEMA OF ARM—cont.

Trichinosis

Urticaria

(See *Anasarca*, 191)**485. Axillary Swellings**

Abscess

Aneurysm

Accessory Mammæ

Affections of Glands
(see 487)

Lipoma

486. AXILLARY GLANDS

The pectoral chain receives its lymphatic vessels from the mamma and the front of the chest; the subscapular group from the back, and the central series from the arm. The three inner fingers belong to the supra-condyloid gland

487. Enlarged

Systemic conditions. Irritation in the above areas

Cancer, Secondary

Lymphosarcoma

Lymphadenoma

Leucocythæmia

Plague

Sepsis

Syphilis

Sarcoma, Secondary

Symmetrical Adenolipomatosis

488. Enlarged Trochlear Gland

Hereditary Syphilis

489. Cold Extremities

Arterio-sclerosis

Ague (cold stage)

Anæmia

Cholera

Concussion of Brain

Collapse (see 142)

Dilatation of Heart

Malformation of Heart

Paralysis

Stomach, Atony of

Syringomyelia

affected limb

490. Foot Everted

Coxa vara

Fracture, Pott's

Fracture of Tibia and Fibula

Fracture, Extracapsular of Thigh

Hip, Dislocation into Foramen

Hip, Dislocation on Pubes

491. Foot Turned-in

Hip, Dislocation on Dorsum Ilii

Talipes varus (anterior half)

492. Arm Shortened

Achondroplasia

Dislocation upwards

484-492

ARM SHORTENED—cont.

Infantile Paralysis

Infantile Hemiplegia

493. Spade Hand

Myxœdema

Cretinism

494. Claw Hand (Main-en-griffe)

Dupuytren's Disease

Progressive Muscular Atrophy

Spinal Pachymeningitis

Tetany

Ulnar Nerve Injuries

495. Brown Spots on Back of Hand

Arsenic-poisoning

Addison's Disease

Cancerous Cachexia

Exophthalmic Goitre

Freckles

Leprosy

Rheumatoid Arthritis

Scurvy

Syphilis

Tuberculosis

Xeroderma

496. Clubbed Fingers

Acromegaly

Aneurysm of Aorta

Cirrhosis of Lung

Dyspnœa, Chronic (see 725)

Empyæma

sometimes transient

Emphysæma

Malformation of Heart

Pulmonary Osteoarthropathy

Pleurisy, Old

*Phthisis, II.

497. Hand Deflected Outwards at Metacarpophalangeal Articulation

Rheumatoid Arthritis

498. Finger Swollen

Abscess

Cellulitis

Chilblains

Erysipelas

Foreign Body

Gout

Rheumatoid Arthritis

Sclerodactyla

Spina ventosa

tubercle of bone

Syphilitic Dactylitis

499. Finger-Tips Red and Swollen

Chilblains

Erythromelalgia

Hysteria

Locomotor Ataxy

Neurasthenia

Onychia

NAILS

500. Cyanosed

Ague (cold stage)
 Dyspnoea (see 725)
 Emphysæma
 Mitral Disease
 Malformation of Heart
 Phthisis
 Raynaud's Disease
 Xeroderma pigmentosa

501. Brittle

Favus
 Gout
 Neuritis
 Psoriasis
 Siringomyelia

502. Shed

Alopecia
 Diabetes
 Locomotor Ataxy
 Leprosy
 Onychia
 Syphilis

503. Incurved

Diabetes and other
 Wasting Diseases (see
 173)

504. Grooved Transversely

A recent Acute Illness
 Pulmonary Osteo-
 arthropathy

JOINTS

505. Swollen

Barlow's Disease
 about large joints
 Charcot's Joint (see
 506)
 Dengué
 Gout
 Glanders
 Hydrops Articuli
 Hereditary Syphilis
 Hæmophilia
 Locomotor Ataxy
 Loose Cartilage
 Myelitis, Acute (x)
 Osteitis, Acute Articular
 Peliosis rheumatica
 Pyæmia
 Purpura
 Puerperal Fever
 Rheumatism, Acute
 Rheumatism, Gonor-
 rhœal
 Rheumatoid Arthritis
 Synovitis, Acute
 Synovitis, Tubercular
 Syphilitic Arthritis
 Trichinosis
 Uræmia (x)

* * Beware of bursæ

506. Charcot's Joint

*Locomotor Ataxy
 Siringomyelia (x)

500-506

507. Stiffness

Adhesions

Abscess near Joint

Appendicitis

right abdominal muscles
and hip

Ankylosis

Cancer

Gout

Hysteria

Injuries

Lichen ruber

Myositis ossificans

Phlebitis

Peritonitis

Pulmonary Osteo-
arthropathyPelvic Cellulitis
one thigh

* Rheumatism

Rheumatoid Arthritis

Synovitis, Simple or
Tubercular

Synovial Effusion

Scleroderma

'Spondylose rhizomé-
lique'

Trichinosis

* * Beware of mistaking
rigidity for stiffness
(see 788)**508. Creaking**

Morvan's Disease

Myxœdema

Osteitis deformans

Rheumatism

Rheumatoid Arthritis

Synovitis, I. and III.

509. Distorted

Coxa vara

Caries of Epiphysis

Dislocation

Genu retrorsum (510)

Genu valgum

Genu varum

Osteitis deformans

Rheumatoid Arthritis

Rickets

Rachitis adolescentium

**510. Genu Retrorsum
(Hyperextension)**

Charcot's Disease

Congenital Paralytic
Club FootDeformity of Opposite
Leg

Locomotor Ataxy

Rickets

Rudimentary Patella

511. Tailor's Rotation

Coxa vara

Absent in M. coxæ

GENITALS**512. Priapism**

Ascarides

Cantharides-poisoning

Convalescence from

Acute Disease

PRIAPISM—continued

Calculus of Bladder

Distended Bladder

Epilepsy (præm.)

*Gonorrhœa

Hydrophobia

Hæmorrhoids

Hæmorrhage in Middle

Lobe of Cerebellum

Leucocythæmia

Lesion of Pons

Loaded Rectum

Myelitis

Prostatic Disease

Spinal Meningitis

Tetanus

Urethritis

513. Pendulous Testicles

Debility

Diabetes

Locomotor Ataxy

Masturbation

Sexual Excess

Spermatorrhœa

(See *Sexual Power*, 144)**514. Scrotal Swelling**

Bites of Insects (s)

Cancer, Encephaloid

Erysipelas

Elephantiasis

Epithelioma

('chimney-sweep's cancer')

Hæmatocele

Hydrocele

Hernia

'Lymph Scrotum'

Œdema

Varicocele

515. Swelled Testicle

Abscess

Cancer

Cystic Disease

Epididymitis

Enchondroma

Orchitis, Simple

Orchitis, Syphilitic

Orchitis, Tubercular

Sarcoma

516. Labia, Swelling of

Abscess

Boil

Cancer

Chancre

Cyst

Hæmatocele

Hernia

Hypertrophy

Varix

Warts

MICTURITION**517. Frequent**

Ascarides

Angina Pectoris

Anteflexion

Azoturia

FREQUENT—continued

Ague (præm.)
 Blood-clots in Bladder
 Calculus
 Cancer of Bladder
 Cirrhosis of Kidney
 Cantharides
 Cystitis
 Diabetes mellitus
 Diabetes insipidus
 Dysentery
 Dysmenorrhœa
 Emotions
 Exposure to Cold
 Fungus of Bladder
 Foreign Body in
 Bladder
 Fistula in Ano
 Gout (præm.)
 Gravel
 Gonorrhœa
 Hæmorrhoids
 Hydronephrosis
 Hypertrophy of Bladder
 Hyperpyrexial Sun-
 stroke
 Hyperæsthesia of
 Bladder
 Loaded Rectum
 Neuralgia of Bladder
 Nephritis, Chronic
 Over-purgation
 Prolapsus Uteri
 Prolapse of Bladder

Peritonitis, I.
 Proctitis, Acute
 Pyelitis, Chronic
 Renal Colic
 Retention with Inconti-
 nence
 Stricture of Urethra
 Tubercular Bladder
 Tubercular Kidney
 Tumour of Bladder
 Ulcer of Bladder
 Uterine Fibroid
 Uterine Congestion

518. Suppression of Urine

Acute Yellow Atrophy
 Abdominal Aneurysm
 Asiatic Cholera, III.
 Cholera, Spasmodic (s)
 Collapse (see 142)
 Irritant-poisoning
 Intestinal Obstruc-
 tion (s)
 Lead Colic
 Nephritis, Acute
 Pernicious Intermittent
 Peritonitis (s)
 Remittent Fever (severe)
 Suppuration, Renal
 Sunstroke (late)
 Thrombosis of Inferior
 Vena Cava
 Typhic state (143)

519. Incontinence

Atony of Bladder
 Anæsthesia of Bladder
 nocturnal
 Apoplexy
 Ascarides
 Atrophy, Senile
 Ataxic Paraplegia
 Coma (see 28)
 Cystitis (x)
 Compression of Cord
 Epilepsy
 nocturnal
 General Paralysis of
 Insane (late)
 Infantile Paralysis (s)
 Locomotor Ataxy
 Meningitis, Cerebro-
 spinal
 Meningitis, Chronic
 Spinal
 Mucous Disease
 nocturnal
 Myelitis, Chronic
 *Over-distension of
 Bladder
 ‘retention with inconti-
 nence’
 Purulent Spinal Pachy-
 meningitis
 Prostatitis
 Phimosis
 Paraplegia
 Paralysis of Neck of
 Bladder

Spina bifida (s)
 Spinal Meningeal Hæ-
 morrhage
 Spinal Concussion
 Spinal Apoplexy
 Shock
 Super-Acid Urine
 Softening of Cord,
 Transverse
 Spasm of Detrusor
 Venereal Excess

520. Retention

Atony of Bladder
 Catarrh of Bladder
 Coma (see 28)
 Dysentery
 Diphtheritic Paralysis
 Hysteria
 Impacted Calculus
 Locomotor Ataxy
 Myelitis, Chronic
 Meningitis, Internal
 Spinal
 Meningitis, Cerebro-
 spinal
 Obstruction of Ureters
 Pericystitis
 Paralysis of Bladder
 Peritonitis, II.
 Prostate, Enlarged
 Stricture of Urethra
 *Spasm of Urethra
 Spina bifida (s)

RETENTION—*continued*

Spinal Meningeal Hæ-
morrhage, i.
Softening of Cord,
Transverse
Urethritis

521. Painful Micturition

Cystitis
Calculus (passage)
Enlarged Prostate
Foreign Body in
Urethra

*Gonorrhœa

Pyelitis
Stricture
Tubercular Bladder
Urethritis
Urethral Caruncle
Urethral Chancre

**522. Dysuria, Tenesmus,
or Strangury**

Appendicitis (s)
Acrid Urine
Calculus, Vesical
stream interrupted
Cystitis
Congestion of Kidney
cantharides, turpentine,
etc.

Compression of Cord
Cancer of Bladder,
Cervix, or Prostate
Concussion, Spinal
Dysmenorrhœa

Dysentery
Fungoid Bladder
Gravel
Gonorrhœa
Hæmorrhoids, Inflamed
Locomotor Ataxy
Metritis, Acute
Neuralgia of Bladder
Ovarian Cyst
Pyelitis
Prolapsus Uteri
Prostate, Enlarged
Paralysis of Diaphragm
Pelvic Peritonitis
Pelvic Cellulitis
Perinæal Abscess
Polypus of Bladder
Prostatitis
Spasm of Bladder
Stricture, Advanced
Tumour of Bladder
Urethral Chancre
Urethritis
Ulceration of Bladder
Variola or Varicella
vesicles in urethra

523. Diminished Stream

Atony of Bladder
Impacted Calculus or
Clot
Prostate, Enlarged
Prostatitis
Phimosis

*Urethral Stricture

URINE**524. Pale**

Anæmia (225, 982)
 Asthma, Spasmodic
 Amyloid Kidney
 Ague (præm.)
 Cirrhosis of Kidney
 Chlorosis
 Convalescence
 Copious Drinking
 Diabetes
 Diabetes insipidus
 Diuretics
 including alcohol
 Gout, Chronic
 Hysteria
 Stomach, Atony of
 Tannin internally
 Uryhæmaturia
 turns red with hydro-
 chloric acid

525. High Colour

Cancer of Liver
 Cirrhosis of Liver
 Cyanotic Liver
 Congestion of Kidney
 Dysentery
 Duodenal Catarrh
 Dyspepsia
 Gout
 Gastritis
 Hepatitis, Acute
 Influenza
 Lithæmia

Peritonitis

Pernicious Anæmia

Pyrexia (see 831)

Also from exercise, food,
 perspiration, and from
 taking rhubarb, saffron,
 santonin, or turmeric

526. Brown to Black

*Jaundice

Melanotic Cancer

after standing

Paroxysmal Hæmoglo-
 binuria

also from taking into the
 system carbolic acid,
 creasote, salol, or tar

527. Smoky

Usually due to renal
 hæmorrhage

Bilharzia

Cancer of Kidney

Concretions in Tubules

Cirrhosis of Kidney (late)

Hæmophilia

Hæmoglobinuria

Hæmaturia

Paroxysmal Hæmoglo-
 binuria

*Nephritis, Acute

Purpura

Renal Colic

Rupture of Kidney

Scurvy

Suppuration of Kidney

Tubercle of Kidney

(See *Blood in Urine*, 549)

524-527

528. Milky

Chyluria

Obstruction of Thoracic
DuctWhite Urates in suspen-
sion**529. Frothy**Mucus, Albumen, Bile,
or Sugar (*q.v.*)**530. Blue**Methylene Blue, In-
gestion of
in drugs or confectionery
Oxidation of Indican(See *Indican*, 553)**531. Super-acid**

Ague Paroxysm

Dilatation of Stomach

Gout

Leucocythæmia

Pyelitis

Paroxysmal Hæmoglo-
binuria

*Rheumatism, Acute

Also after eating cheese,
meat, and cereals**532. Sub-acid (of no sig-
nificance)**

Chlorosis

Ingestion of Fruit

Ingestion of Potatoes

533. AmphotericContaining both basic and
acid phosphates (?)

(See 996)

534. ALKALINE**(a) Volatile**

Acute Yellow Atrophy

Ague (intervals)

Cystitis

Gastric Irritation

Hyperchlorhydria

*Retention

Spinal Injury

Tuberculosis of Urinary
Tract

Vegetable Diet

(b) Fixed

Ingestion of Alkalies.

'Phosphaturia'

Prostration

535. High Specific Gravity

Azoturia

Congestion of Kidney (u)

*Diabetes mellitus

Gout, Acute

Hæmaturia

Leucocythæmia

Nephritis, Acute

Pyrexia (see 831)

Pneumonia, Acute

Rheumatism, Acute

Also after repletion, long
retention, profuse per-
spiration, and ingestion
of phloridzin

536. Low Specific Gravity

Amyloid Kidney
 Atony of Stomach
 Anæmia
 Ague (cold stage)
 *Cirrhosis of Kidney
 Cystic Disease of Kidney
 Chyluria
 *Diabetes insipidus
 Gout, Chronic
 Hysteria
 Hydronephrosis
 intermittent
 Myxœdema
 Also after fasting, copious
 drinking, and diuretics

537. Quantity Increased

Anæmia
 Asthma, Spasmodic
 Angina Pectoris
 Amyloid Kidney
 Ague (cold stage)
 Cirrhosis of Kidney
 (late)
 Cystic Disease of Kidney
 Chlorosis
 *Diabetes mellitus
 *Diabetes insipidus
 Hydronephrosis
 coincidentally with the disappearance of the lumbar swelling

Hysteria
 Floating Kidney
 intermittently
 Myxœdema
 Resorption of Effusions
 Tumour of Fourth
 Ventricle (s)
 Also after copious drinking; after foods containing citrates or tartrates, and after diuretics, including gin, beer, hock, and phloridzin

538. Quantity Diminished

Abdominal Aneurysm
 or Tumour
 by pressure
 Ascites (late) (926)
 Atrophy of Kidney,
 Acute
 Congestion of Kidney
 Collapse of Lung
 Cholera
 Dilatation of Stomach
 Embolism of Kidney
 Fatty Kidney
 Gastritis, Chronic
 Gout
 Influenza
 Intestinal Obstruction
 Lead Colic
 Mechanical Obstruction
 Pyrexia (see 831)
 Pleurisy with Effusion
 Peritonitis

DIMINISHED—*continued*

Pneumothorax

Relapsing Fever

Thrombosis of Inferior
Vena CavaAlso abstention from fluids,
excessive perspiration,
etc.(See *Retention*, 520, and
Suppression, 518)

539. Albumen

Amyloid (much)

Alcoholic Coma

Acute Yellow Atrophy

Acute Atrophy of Kid-
neyBronchitis, Chronic
littleCirrhosis of Kidney
little or noneCongestion of Kidney
littleCystic Disease of Kid-
ney

Cirrhosis of Liver (s)

Diphtheria (3rd or 4th
day)

Diabetes

Displacement of Heart

Endocarditis

Embolism of Kidney

Emphysæma

Hepatitis, Acute

Hydrophobia

Hyperpyrexia

Intermittent Hæmo-
globinuria

Leucorrhœa

Mumps

Medulla, Lesion of

Mitral Regurgitation

* Nephritis, Acute (much)

Nephritis, Chronic

much at first, less later

Obstruction to Vena
Cava inferior

Ovarian Tumours

Pancreatitis, Acute

Peliosis rheumatica

Psittacosis

Pernicious Intermit-
tent

Pregnancy

Pneumonia, Acute
a little

Remittent, Severe

Suppurative Nephritis

Tricuspid Regurgita-
tionTuberculosis, Acute
little

Tumours, Abdominal

Variola

Weil's Disease

Yellow Fever

* * Caution : albumen may
be derived from blood,
pus, or semen

540. Intermittent Albuminuria

Is found in some apparently healthy individuals, especially after excitement, active exercise, or heavy nitrogenous meals. It ceases when the patient is recumbent

541. Bence-Jones Albumen
(See 542)**542. Albumose or Peptones**

Cancer of Digestive Tract

Diphtheria

Enteric Fever

Influenza

Liver Diseases

Mumps

Meningitis, Purulent

Mollities Ossium

Multiple Myelomata

Myxœdema

Pneumonia, Acute, III.

Phthisis

Rheumatic Fever

Scarlatina

Syphilis

Septicæmia

* Suppurative Processes in general

Ulcer of Intestine

* * Beware of mistaking decomposition of albumen in the urinary passages

543. Sugar

Alcoholism

Acromegaly

Boils

a little

Carbuncles

a little

Cancer of Pancreas (s)

Chronic Pancreatitis

Calculus, Pancreatic after paroxysm

* Diabetes mellitus

Fractured Skull

a little

Hydrophobia (s)

Medulla, Lesion of

Neurasthenia

Portal Obstruction

transient—urina cibi only

Puerperal state

really lactose

Sugar is also found after eating largely of grape sugar, and after nitrite of amyl. Phloridzin produces it

544. Inosite (Muscle Sugar)

Diabetes insipidus

Nephritis, Chronic

Tumour of Fourth Ventricle

Copious Draughts of Water

545. Acetone

* Diabetes

esp. diabetic coma

Cancer

ACETONE—continued

Cerebral Disease
 Exophthalmic Goitre
 Fevers
 Hyperpyrexia
 Nephritis
 Tuberculosis, III.

Also after an exclusive diet
 of highly nitrogenous
 food

SEDIMENTS**(a) Naked-eye Sediments, etc.****546. Brickdust Sediment**

Chiefly urate of soda
 Ague (sweating stage)
 Constipation
 Congestion of Kidney
 Cyanotic Liver
 Cancer of Liver
 Dysentery
 Dyspepsia
 Dilatation of Stomach
 Emphysæma
 Fæcal Accumulation
 Gastritis, Acute or
 Chronic
 Gout
 Hyperidrosis (see 176)
 Lithæmia
 Pyrexia (see 831)
 Pneumonia, Acute
 Rheumatism, Acute

547. White Sediment

Soluble on heating. This
 takes the place of the
 above in children and in
 some adults

548. Mucus

*Cystitis

Cancer of Bladder

Pyelitis, Acute

Spinal Injuries and
 Diseases

Tuberculosis of Bladder

In small quantities it is a
 normal constituent; in
 large quantities it is
 chiefly noticeable in
 alkaline urine

Pus (see *Microscopic
 Sediments*, 568)

549. BLOOD**Hæmaturia**

Hæmoglobin in corpus-
 cles

Ague

Asthma

Barlow's Disease

Bilharzia

Cystitis, Acute (x)

Cystic Disease of Kid-
 ney

Congestion of Kidney,
 Active

Cancer of Kidney, Blad-
 der, or Prostate

Calculus, Renal or
 Vesical

545-549

BLOOD—continued

Cholera

Embolism of Kidney

Foreign Body
in urinary tract

Gonorrhœa

Injury

Jaundice (s) (see 230)

Irritants

e.g. cantharides or tur-
pentine

Leucocythæmia

Menstruation

Movable Kidney

Metrorrhagia

Nephritis, Acute

Nephritis, Chronic

large red variegated kidney

Nephritis, Suppurative

Pyelitis, Acute

Poisoning by Phos-
phorusPoisoning by Sulphuric
Acid

Purpura hæmorrhagica

Prostatitis

Prostate, Tuberculous

Prostate, Tumour of

Pernicious Intermittent

Relapsing Fever

Remittent Fever

Sarcoma of Kidney

Scurvy

Tubercle of Bladder

Urethritis

Ulcer of Bladder
intermittentUlceration in Urinary
TractVillous Growth of Blad-
der

Yellow Fever

550. Hæmoglobinuria

(Hæmoglobin free)

Chlorosis

colourless = uryhæmo-
globin

Malaria (x)

Paroxysmal Hæmo-
globinuria

Raynaud's Disease

Winkel's Disease

This condition also occurs after severe burns or transfusion of blood and in cases of poisoning by chlorate of potash, arseniuretted hydrogen, nitro-benzol, sulphuretted hydrogen, and carbolic, hydrochloric, and sulphuric acids

551. Hæmato-porphyrin

(Dark red urine—rare)

Addison's Disease

Chorea

Enteric Fever

Meningitis

Measles

Pernicious Anæmia

Pneumonia

HÆMATO-PORPHYRIN— *continued*

Pericarditis

Rheumatism, Acute
action of sulfonal, trional,
tetranol

552. Clots

Cancer of Kidney
vermicular

Chyluria
white

Menstruation, etc.

Renal Calculus

Ulcer (s)

Villous Growth

553. Indican

Normal in small quantities

Appendicitis

Addison's Disease

Cholera

Cancer of Stomach or
Liver

Lymphatic Growths

Obstruction in Small
Intestine

Pernicious Anæmia

Phthisis

Tabes mesenterica

It is also produced in
excess by residence in
the tropics and by
the action of turpentine,
bitter almonds, and nux
vomica

554. Bile Colouring-matter (see *Jaundice*, 230)

555. Bile Acids

Conditions in which the
red corpuscles are
broken up (see 670)

Jaundice (see 230)

556. Fæces passed through Urethra

Cancer of Bladder

Cancer of Rectum

Recto-vesical Fistula

557. Ehrlich's Reaction (see 996)

*Enteric Fever

Influenza

Measles

Pulmonary Tuberculosis

Pneumonia

Scarlatina

Septicæmia

* * Absent in meningitis

558. Urea Increased

Azoturia

Ague (warm stage)

Chorea

Diabetes

Diabetes insipidus

Enteric Fever

Leucocythæmia

Pyrexia (see 831)

Pneumonia, Acute

Rheumatism, Acute

551-558

UREA INCREASED—cont.**Scarlatina**

* * Other causes are excess of food, bathing, exercise, and the following drugs: ammonium salts, arsenic, antimony, codeia, sulphuric acid, and large doses of quinine

559. Urea Diminished

Amyloid (slightly)

Anæmia

Acute Yellow Atrophy

absent at last

Cirrhosis of Liver

Cancer of Liver (late)

Contracted Kidney

Congestion of Kidney,
Passive

Nephritis, Acute

Nephritis, Chronic

Phthisis

Rickets

Syphilis

Starvation

Uræmia

Also phosphorus-poisoning and small doses of quinine

560. Phosphates Increased

Alkaline Urine

apparently

Chorea

Diabetes insipidus

Encephalitis

Mania, Acute

Pyrexia

Rickets

Pneumonia, III.

Pleurisy

Rheumatism, Acute

Tumours of Brain

In general, diseases of bones, brain, or spinal cord

561. Phosphates Diminished

Acute Yellow Atrophy

Nephritis

562. Uric Acid Increased

Gout

convalescent stage

Fevers

Heart Diseases

Leucocythæmia

Liver Affections

Lung Diseases

Lithiasis

Rheumatism

In general, uric acid is increased either by deficient oxidation (fevers, heart and lung diseases), or by food containing much nucleolin, especially sweetbreads

563. Uric Acid Diminished

Anæmia

Diabetes insipidus

Gouty Paroxysm

URIC ACID DIMINISHED—*continued*

Kidney Disease (advanced)

Lead-poisoning

Rickets

Scurvy

564. Chlorides Increased

Diabetes insipidus

Rötheln

Rapid Absorption of
Dropsical Effusions**565. Chlorides Diminished**Acute Yellow Atrophy
absent at last

Dyspepsia

Enteric Fever

Inanition

Kidney, Congestion of

*Pneumonia, Acute

Pyrexia (see 831)

Rheumatism, Acute

566. Hippuric Acid

Chorea

Diabetes mellitus

Pyrexia (see 831)

It occurs also after taking
fruit or benzoic acid**567. Lactic Acid**

Mollities Ossium

Puerperal state

MICROSCOPIC SEDIMENTS**568. Blood-corpuscles**

As in hæmaturia (see 549)

569. Pus-cells

Abscess

bursting into urinary tract

Cystitis

Cancer of Bladder

Gonorrhœa

Gleet

Leucorrhœa

Pyelitis, Acute and
ChronicPyonephrosis
intermittent

Prostatic Abscess

Renal Calculus (s)

Suppurative Nephritis

Tuberculosis

Urethritis

570. Cancer-cells

Doubtful

Cancer of Urinary Tract

571. Epithelium

Normal in moderate quantity. There are three varieties in the urinary tract. Squamous: the meatus, the vagina, the bladder, and the pelvis of the kidney. Columnar: the urethra and ureters. Spheroidal or, by pressure, polygonal, tubules of kidney. This last is the important kind

Excessive

Cystitis

Nephritis, Acute

563-571

EXCESSIVE—*continued*

Renal Calculus
 Pyelitis
 Scarlatina
 Urethritis

572. Fat-globules

Fat Embolism
 (recent fracture)
 Nephritis, Chronic
 (large pale kidney)

573. Torula cerevisiæ

Diabetes
 Glycosuria

574. Hooklets

Hydatids

575. Eggshells and Flask-shaped Bodies

Bilharzia

576. Elastic Fibres

Tubercular Bladder
 Tubercular Kidney

577. Gonococci

Gonorrhœa

578. Bacilli

Tubercle of Urinary
 Tract
 Enteric Fever

579. Pneumaturia

(air in bladder)
 Foul Catheterism (Bac-
 terium lactis aëro-
 genes)

580. Oxalates

Octahedric or dumb-bell
 crystals

Atony of Stomach
 Bronchitis, Chronic
 Diabetes

Jaundice
 Neurasthenia
 Phthisis

Paroxysmal Hæmoglobi-
 nuria

In general, diseases of
 imperfect oxidation, as
 heart and lung diseases.
 Oxalates also appear
 after eating gooseberries,
 rhubarb, cabbage, etc.

581. Phosphates (Prismatic Crystals)
(See 560)**582. Uric Acid** (see 562)
Urates in very acid urine**583. Amorphous Urates**
(See *Brickdust Sediment*)**584. Spermatozoa**
Normal after coitus
Masturbation
Spermatorrhœa**585. Cholestearine**
Cystitis
Hydatids of Kidney
Filaria**586. Leucine and Tyrosine**
In acid urine only
Acute Yellow Atrophy

LEUCINE—continued

Enteric Fever, Severe
Phosphorus-poisoning
Tuberculosis, Acute
Typhic state (see 143)

CASTS**587. Hyaline or Fibrinous**

A few are often present
normally

Amyloid Kidney
Diphtheria
Diabetes
Displaced Heart
Jaundice (yellowish)
Mitral Disease
Nephritis, Acute
both small and large
Nephritis, Chronic
large—numerous
Pancreatitis, Acute
Pregnancy
'Physiological' or In-
termittent Albumin-
uria

588. Granular Casts

Cyanotic Kidney (x)
Nephritis, Chronic
late

589. Epithelial Casts

Action of Irritants
Congestion, Passive
Jaundice

Nephritis, Acute

'cloudy swelling'

Weil's Disease

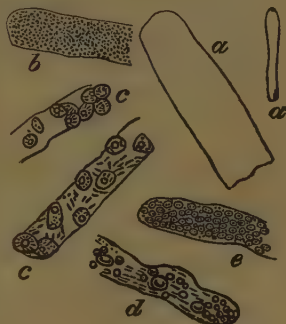
590. Fatty Casts

Fatty Degeneration of
Kidney

or of a portion of it

Nephritis, Chronic

large pale kidney

**CASTS**

a, hyaline; b, granular; c, epi-
thelial; d, fatty; e, blood

591. Blood Casts

Cancer of Kidney
Cystic Disease of Kid-
ney
Congestion of Kidney,
Passive
Embolism of Kidney
Hyperæmia of Kidney

586-591

CASTS—*continued*

Nephritis, Acute

Renal Calculus

External or internal use of
cantharides or turpen-
tine

STOOLS

592. Flattened Fæces

Ischio-rectal Abscess

Hæmorrhoids

Prostate, Enlarged

Prolapsus Uteri

Rectal Growths

Retroflexion

Uterine Fibroids

593. Diminished Diameter,
or Pipe-Like

Intussusception

Prolapsus Ani

Scybala

Stricture of Rectum

594. Scybala (Round and
hard)

Cancer of Intestine

Dysentery

Dilatation of Stomach

Diabetes

Ingestion of Opium

Retained Fæces

Ulcer of Stomach

595. Pale, Putty-coloured,
or Yellow

Appendicitis

Anæmia (225)

Amyloid Liver

Acute Yellow Atrophy, *i.*

Cancer of Duodenum

Cancer of Liver

Cirrhosis of Liver

Diarrhœa, Irritative

Enteric Fever

like pea-soup

Jaundice (see 230)

especially the obstructive
variety

Mucous Disease

Pancreatic Disease

Retention of Fæces,

Prolonged

Rickets

Also a milk or vegetable
diet

596. Green (Infants

Cholera, Spasmodic, *i.*

Diarrhœa, Irritative

Dentition

Enteritis, Acute

Hydrocephalus, Spuri-
ous

Calomel produces 'chop-
ped spinach' stools

597. Slate Colour

Iron or bismuth internally

598. Tarry (Melæna)

Hæmorrhage from stom-
ach or upper part of
small intestine

Acute Yellow Atrophy

Buhl's Disease

TARRY—continued

Cancer of Stomach or
Duodenum

Cancer of Liver

Cirrhosis of Liver

Dysentery (s)

Embolism of Mesenteric
Artery

Hæmophilia

Leucocythæmia

Purpura

Portal Obstruction

Ulcer, Duodenal

Ulcer, Gastric

599. Serous

Arsenic-poisoning

Asiatic Cholera, II.
rice-water stools

Cholera, Sporadic

Cancer of Rectum
scalding

Diarrhœa, II

Dysentery

Enteritis, Acute

Sunstroke

600. Offensive

Decomposition of intes-
tinal contents or de-
ficiency of bile

Cancer of Colon

Dysentery

Erysipelas

Enteric Fever

Enteritis, Acute

Glanders, II.

Gastritis, Acute Erythe-
matous

Jaundice (230)

Retention of Fæces,
Long

Rickets

Scrofula

Ulcer of Colon

Undigested Food

601. Purulent

Appendicitis

Abscess

rupturing into bowel—
pelvic, perinephritic,
perityphlitic, etc.

Dysentery

Enteritis

Fistula

Proctitis, Acute

Ulcer of Rectum

* * Beware of mistaking pus
from urethral or vaginal
discharges

602. Blood in Stools

Hæmorrhage from large,
or lower part of small,
intestine

Amyloid Intestine

Arsenic-poisoning

Aneurysm (rupture)

the hæmorrhage may,
however, be due to
pressure upon the veins

Amenorrhœa (x)

Acute Yellow Atrophy

Barlow's Disease

BLOOD IN STOOLS—*cont.*

Colitis, Ulcerative

Cancer of Rectum or Intestine

Dengué

Diarrhœa, Inflammatory

Dysentery
often with fleshy lumps

Enteric Fever

not necessarily perforation

Embolism of Mesenteric

Hæmophilia

*Hæmorrhoids, Internal
Injuries

Intussusception

Intermittent Fever,
Severe

Irritant-poisoning

Leucocythæmia

Purpura

Proctitis

Polypus

Perforation of Bowel

Pernicious Remittent

Portal Obstruction

Relapsing Fever

Scurvy

Ulcer of Bowel

solitary, tubercular, or
enteric

Vascular Growths

Winkel's Disease

Yellow Fever

(See 598)

603. Membranes in StoolsCancer of Intestine
(sloughs)Colitis, Membranous
(casts)

Dysentery

Mucous Disease of
InfantsMalignant Relapsing
Fever

Proctitis, Acute

604. Mucus in StoolsBilharzia of Sigmoid
Flexure

Cancer of Rectum

Colitis

fæces coated with mucus

Dysentery

Duodenal Catarrh

mucus mixed with bile (u)

Diarrhœa, Inflammatory

Enteritis

fæces mixed with mucus

Gastritis, Chronic

Impacted Fæces

Intussusception

Mucous Disease of
Infants

Proctitis

Ulcer of Large Bowel

dysenteric, syphilitic, or
tubercular

605. Fat in Stools

Normal in small amount

Dyspepsia in Infants
undigested fatty portion of
milk

Jaundice (230)

Pancreatic Disease

606. Undigested Food

Atony of Stomach

Dentition

Diarrhoea lenterica

Excess of, or Improper
Food in Infants

607. Concretions

Bezoar (Hysteria)

¹ Gallstones

Pancreatic Calculi

Scybala, Stonelike

** Beware of the fatty acid
stone produced by large
doses of olive oil

608. Parasites

Ascaris vermicularis

Ascaris lumbricoides

Tænia solium

Tænia mediocanellata

Bothriocephalus latus

Trichinæ

Tricocephalus dispar

609. Microscopic Examination

Bacillus coli communis
normal, but more abundant in suppuration

Bacillus coli dysentericus
dysentery

Comma Bacillus
cholera

Bacillus tuberculosis
tubercle

Amœba dysenteriæ
dysentery

Teischmann's Blood-
crystals

Charcot-Leyden Crystals
helminthiasis

Ova of Worms

Eggshells or Eggs of
Bilharzia

Undigested Food

** The presence of *Bacillus*
typhosus in the stools
can be determined by
culture only

¹ These stones are seldom found. This circumstance, the fact that the nucleus commonly consists of a foreign body, and the frequency with which I have known hepatic colic follow upon eating grapes, raisins, mulberries, etc., have convinced me that this colic is more often caused by foreign bodies than by gallstones.

VOMITING, ETC.**610. Nausea and Retching**

Alcoholism
 Acute Yellow Atrophy
 Appendicitis
 Arsenical-poisoning
 Anæmia of Brain
 Ague (præm.)
 Cirrhosis of Kidney
 Catarrh of Bile-ducts
 Cholera, Sporadic and Asiatic
 Conium-poisoning
 Cancer of Liver
 Cancer of Pancreas
 Cancer of Colon
 Congestion of Liver
 Concussion of Spine
 Enteritis, Acute
 Foreign Body in Throat
 Gastritis, Acute and Chronic
 Gastric Irritation
 Hernia
 Hydrophobia
 Hooping Cough
 Irritant-poisoning
 Lead Colic
 Migraine
 Menière's Disease
 Mediastinal Tumour
 Measles (prodr.)
 Meningitis simplex

Pregnancy
 Ptomainism
 Paralysis, Infantile (onset)
 Pharyngitis, Chronic
 Post-pharyngeal Abscess
 Pelvic Cellulitis
 Pelvic Peritonitis
 Perforation of Stomach
 Peritonitis
 Quinsy
 Relaxed Uvula
 Round Worms
 Seasickness
 Shock
 Scarlatina (prodr.)
 Typhus
 Variola (prodr.)

VOMITING**611. Cerebro-spinal**

Apoplexy
 Concussion of Brain
 Concussion of Cord
 Compression of Brain
 Cerebellar Disease
 Epilepsy
 Hydrocephalus
 Hyperæmia of Brain
 Hypertrophy of Brain
 Infantile Paralysis (onset)
 Locomotor Ataxy (gastric crisis)

CEREBRO-SPINAL—*cont.*

Meningitis, Simple

Meningitis, Tubercular

Meningitis, Cerebro-spinal

Menière's Disease

Seasickness

Stokes-Adams Disease

Shock

Spinal Paralysis, Acute
(adults)Tumour of Brain
especially subtentorial**612. Irritative**

Amyloid Liver

Appendicitis

Alcoholism

Arsenic-poisoning

Colic

Cirrhosis of Stomach

Cirrhosis of Liver

Cholera, Asiatic

Cholera, Sporadic

Catarrh of Bile-ducts

Cancer of Stomach

Cancer of Duodenum

Cancer of Liver

independent of meals

Cancer of Colon

Cancer of Pancreas

Cancer of Pylorus

long after meals

Dilatation of Stomach

large quantities at long
intervals

Enteritis, Acute

Gastritis, Acute and
Chronic

Gastralgia

Gastric Irritation

Hernia

esp. strangulated

Hypertrophy of Pylorus

Intestinal Obstruction

early if small intestine,
later and faecal if large
intestine

Irritant-poisoning

Irritant Food

Intussusception (u)

faecal if near valve

Ptomainism

Round Worm

Ulcer of Stomach

soon after food

Ulcer of Duodenum

u. 2 hours after food

Ulcer of Intestine

Volvulus (faecal)

613. ReflexBronchial Glands, En-
larged

Cystitis

Dysmenorrhoea

Endocarditis, Ulcera-
tive

Glandular Fever

Hepatic Colic

Hepatic Abscess

Hepatitis, Acute

REFLEX—continued

Hooping Cough
 Intercostal Neuralgia
 Lymphadenoma
 Mediastinal Tumour
 Metritis, Acute
 Muscular Asthenopia
 Migraine
 Myocarditis, Acute
 Oöphoritis
 Pregnancy
 u. to third month
 Pneumonia, Lobular
 Pelvic Cellulitis
 Pelvic Peritonitis
 Renal Calculus
 Trichinosis

614. Toxæmic Vomiting

Anæmia
 Addison's Disease
 Ague (præm.)
 Acute Yellow Atrophy
 Cirrhosis of Kidney
 Conium-poisoning
 Endocarditis, Septic
 Gout, Undeveloped
 Influenza
 Mumps (onset)
 Pernicious Anæmia
 Roseola
 Remittent Fever
 Scarlatina (onset)
 Uræmia
 vomit contains urea

Variola (onset)

Weil's Disease

Yellow Fever

i. clear; ii. black

* * There is some overlapping in the above classification

615. Hæmatemesis

(Vomiting of blood)

Changed (coffee-ground) or natural

Amenorrhœa

Acute Yellow Atrophy

Arsenic-poisoning

Abdominal Aneurysm

Barlow's Disease (s)

Buhl's Disease

Cirrhosis of Stomach

Cirrhosis of Liver

Cancer of Œsophagus,
 Stomach, or Liver

Cyanotic Liver (s)

Dengué

Diphtheria (x)

Dilatation of Stomach(x)

Gallstone

 ulcerating into duodenum

Glass, Swallowed

Gastritis, Chronic

Hæmophilia

Irritant-poisoning

Intussusception (s)

Leucocythæmia

Mitral Stenosis

Purpura

Pyæmia

HÆMATEMESIS—cont.

Portal Obstruction
 Pernicious Anæmia
 Phosphorus-poisoning,
 Acute
 Pancreatitis
 Remittent, Severe
 Rupture of Varicose
 Oesophageal Vein
 Scurvy
 Typhus
 Ulcer of Stomach or In-
 testine
 Valvular Disease
 Variola, Malignant
 Weil's Disease
 Yellow Fever

* * Beware of swallowed
 blood from nose or teeth,
 and, in infants, from
 cracked nipples

**616. Eructations and Acid
Risings**

Angina Pectoris (term.)
 Atony of Stomach
 Dilatation of Stomach
 Dysentery
 Gastralgia
 Gastric Ulcer
 Gastric Irritation
 Hysteria
 Metritis, Acute
 Neurasthenia
 Peritonitis
 Trichinosis

**617. Pyrosis (Water-
brash)**

(Clear-water Vomit)
 Cancer of Pancreas
 Dyspepsia
 Gastritis, Chronic
 Sometimes a disease in
 itself

CHARACTER OF VOMIT**618. Hyperchlorhydria**

Excess of hydrochloric acid
 Gastric Irritation
 *Gastric Ulcer
 Gastralgia

619. Hypochlorhydria

Deficiency or absence of
 hydrochloric acid
 Atrophy of Gastric
 Mucous Membrane
 Anæmia

*Cancer of Stomach
 Dilatation of Stomach
 Gastritis, Acute
 Gastralgia
 Myxœdema
 Pernicious Anæmia

Blood (see *Hæmateme-
sis*, 615)

620. Coffee-ground (see
Hæmatemesis, 615)**621. Bile**

Vomiting with stomach
 empty
 Hepatic Colic
 (termination)

622. Mucus

Chronic Gastritis

Dilatation of Stomach

** Beware of swallowed
sputa**623. Sarcinæ and Torulæ**

Cancer of Pylorus

Dilatation of Stomach

SPUTA**624. Scanty**

Asthma, Spasmodic, i.

Bronchitis, Acute (on-
set)

Cancer of Lung

Catarrhe sec

Diphtheritic Laryngitis
(onset)

Hay Fever

Laryngitis, Chronic

Pleurisy, Acute (or ab-
sent)Pneumonia, Acute (on-
set)**625. Frothy**

*Bronchitis, Acute

Bronchorrhœa
watery and abundant

Emphysæma

Gangrene of Lung
upper layer of sputaEdema of Lungs
(watery)Pneumonia, Acute
Lobular**626. Viscid**

Bronchitis, Capillary

Hooping Cough

*Pneumonia, Acute

Phthisis (pneumonic
form)**627. Mucous (Sputa
cruda)**Asthma, Spasmodic
termination of a slight at-
tackBronchitis, Acute
terminationBronchial Glands, En-
larged

Enteric Fever

Emphysæma

Hooping Cough

Infiltrated Cancer of
Lungs

Influenza

Laryngitis, Acute

Measles

Mediastinal Abscess

Lobular Pneumonia

Pharyngitis

Phthisis, i.

**628. Muco-purulent
(Sputa cocta)**Asthma, Spasmodic
end of severe attack

Bronchitis, Chronic

Hooping Cough, iii.

Hydatids of Lung

MUCO-PURULENT—cont.

Measles (defervescence)
 Pneumonia, Acute
 stage of 'resolution'
 Phthisis

629. Purulent

Bronchial Glands, En-
 larged
 Bronchitis, Acute (late)
 Bronchitis, Capillary
 Bronchitis, Old Chronic
 Bursting of Abscess or
 collection of pus into
 a bronchial tube—
 viz.:
 Diaphragmatic, Pul-
 monary, Hepatic,
 or Mediastinal Ab-
 scess; Empyæma
 or Pyonephrosis

630. Nummular (Circular)

Bronchorrhœa
 Bronchiectasis
 Cirrhosis of Lung
 Phthisical Cavity
 Sinking in water implies
 long retention

631. Rusty

*Pneumonia, Acute
 Pyæmia
 Tuberculosis, Acute (s)
 Also the presence of Dis-
 tomum pulmonale

632. Casts

Diphtheria
 Membranous Laryngitis
 Plastic Bronchitis
 Pneumonia, Acute (x)

**633. 'Gooseberry-skins'
(Echinococci)**

Hydatids of, or invading a
 lung

634. Black Specks

Gangrene of Lung
 Inhalation of Coal-dust,
 Fog, or Smoke
 Phthisis

635. 'Prune-juice'

Gangrene of Lung
 Œdema of Lung

636. Dittrich's Plugs

Bronchiectasis (fetid)
 * * Beware of mistaking
 plugs from the tonsil-
 lary crypts

637. Greenish-yellow

Actinomyces
 Icteric Pneumonia

638. Fetid

Bronchiectasis
 Cirrhosis of Lung
 Gangrene of Lung
 with tinder-like masses
 Phthisis
 large cavity
 Syphilitic Laryngitis
 (tertiary)

639. Blood-streaked

Usually from violence of cough

Abscess of Lung

Bronchitis, Acute (s)

Bronchitis, Chronic (s)

Bronchitis, Plastic

Cancer of Lung

Emphysæma

Hæmoptysis (passing off)

Malformation of Heart

Mediastinal Abscess

Pulmonary Apoplexy (dark)

Pneumonia, Acute Lobular

Pharyngitis, Chronic

Pharyngitis, Granular

Phthisis, II.

Tonsillitis

Typhus (prodr.)

Also from bleeding teeth, spongy gums, or retching

640. Hæmoptysis

Vomiting of bright-red and often frothy blood

Amenorrhœa (s)

Angeioma laryngeum

Arterio-sclerosis

Aneurysm

systemic or pulmonary

Actinomycosis

Aortic Regurgitation

Bronchiectasis

Bronchial Glands, Enlarged

Cirrhosis of Lungs

Cancer of Lung

Cancer of Larynx

Congestion of Lungs mechanical

Distomum pulmonale chronic recurrent hæmorrhage

Emphysæma (x)

Empyæma on bursting

Fat Embolism

Fractured Ribs

Gangrene of Lung

Hypertrophy of Heart

Ditto, Connective-tissue Form

Hæmophilia

Hydatids of Lung

Laryngitis, Hæmorrhagic

Leucocythæmia

Mediastinal Tumours

Mitral Stenosis and Regurgitation

Malformation of Heart

* Phthisis

Pulmonary Apoplexy

Purpura

Scurvy

Syphilitic Disease of Lungs

HÆMOPTYSIS—continued

Traumatism

Variola, Hæmorrhagic

* * Beware of malingerers,
epistaxis posterior, etc.

MICROSCOPIC CHARACTERS**641. Curschmann Spirals**

(Corkscrew-like fibres of
mucus with a central
thread)

Asthma

Bronchitis, Capillary

Edema of Lung

Pneumonia (s)

Plastic Bronchitis

642. Charcot-Leyden Crystals

Pointed vitreous octa-
hedra

Asthma, Spasmodic

Bronchitis, Plastic

Bronchitis, Chronic

Emphysemæ

643. Elastic Tissue

Curling fibres

Bronchiectasis

Phthisis, II.

Pulmonary Abscess

Pneumonia, Acute (x)

644. Eosinophile Cells

Asthma (numerous)

Bronchitis, Chronic
(a few)

Plastic Bronchitis

645. Brown Pigment in large cells

Brown Induration of
Lung

Mitral Stenosis

646. Distomum pulmonale, or Ova

Distomiosis

647. Pneumococci

Capillary Bronchitis

* Pneumonia, Acute

Empyemæ

A few are normally present
in the saliva

648. Friedlander's Bacillus

Pneumonia, Acute

in five per cent. of the

sputum

649. Pfeiffer's Bacillus (slender with rounded ends)

Influenza

650. Klebs-Loeffler Bacillus

Diphtheria

651. Bacillus Tuberculosis

Phthisis

652. Amœba coli

Hepatic Abscess

bursting into Lung

640-652

MICROSCOPIC CHARACTERS

—continued

653. Actinomyces (radiating)

Actinomycosis

654. Spirochetæ

Gangrenous Stomatitis

655. Staphylococcus pyogenes

Abscess

656. Oidium albicans or Leptothrix

Thrush

Pharyngomycosis

657. Pollen

Hay Asthma

or adventitious

658. Fat Crystals

Gangrene

Phthisical Cavity

Pulmonary Abscess

659. Hooklets

Hydatids of Lung

Hydatids of Kidney or
of Liver bursting into
Lung

THE BLOOD

660. Oligocythæmia

Diminution in the number of red corpuscles. Normal proportion, five millions to the cubic millimetre

Anæmia

Hæmorrhage

Leucocythæmia

Lymphadenoma

Pernicious Anæmia

sometimes reduced to
400,000

Phthisis

661. Leucocytosis

Increase in the number of leucocytes (especially of the polynuclear). Normally, 7,500 to cu. m.m.

Amyloid Disease

Anæmia

the polynuclear only

Carcinoma (s)

Diphtheria

Erysipelas

Endocarditis, Septic

Glanders

Glandular Enlargement

Inflammation

Leucocythæmia

sometimes one white to
four red

Meningitis, Purulent

Pyæmia

Pneumonia

Rheumatism, Acute

Scarlatina

Tuberculosis

There is a normal increase after digestion and during pregnancy

662. Oligoleukæmia

Diminution in the number
of leucocytes

Chlorosis (s)

Enteric Fever

Malaria

Pernicious Anæmia ($\frac{1}{2}$)

663. Lymphocytosis

Increase in the number of
the small mononucle-
ated leucocytes (lymph-
cells)

Hooping Cough

Lymphatic Leucocy-
thæmia

Rickets

Syphilis, Hereditary

664. Poikilocytosis

The red corpuscles altered
in shape — crenated,
pear-shaped, kidney-
shaped, etc.

Anæmia, Profound

Leucocythæmia

Pernicious Anæmia

**665. Nucleated Red Cor-
puscles, Macrocytes
and Microcytes**

Nucleated red corpuscles
that are very large, very
small, or normal in size.
Also termed megalo-
blasts, microblasts, and
normoblasts

Anæmia

few

Chlorosis

Leucocythæmia

Pernicious Anæmia

**666. Eosinophile Cells
Increased**

Asthma

Anæmia (s)

Leucocythæmia

667. Myelocytes

Leucocythæmia

spleno-medullary form

Pernicious Anæmia

**668. Hæmoglobin In-
creased**

Pulmonary Stenosis

**669. Hæmoglobin Dimin-
ished**

Normally 100 c.c.'s of blood
contain 13·5 grams of
hæmoglobin

Anæmia (all forms)

Chlorosis

Enteric Fever

Pernicious Anæmia

**670. Free Hæmoglobin
(Lake blood)**

Hyperpyrexia

Malaria

Phosphorus-poisoning

Sunstroke

**671. Pigment (Melan-
æmia)**

Addison's Disease

Intermittent Fever

Intermittent, Pernicious

PIGMENT—*continued*

Intermittent Hæmoglo-
binuria

Melanotic Tumour

Relapsing Fever

In malaria it is in the
form of 'plasmodia',
contained within the red
corpuscles

672. Hydræmia (Excess of water)

Anæmia

Anasarca

Hæmorrhage

Pregnancy

Pernicious Anæmia

Sp. g. 1035

673. Hyperinosis

Erysipelas

Influenza, i.

Infectious Diseases

Pneumonia

Phthisis

Rheumatism *

Suppuration

Scurvy

Serous Inflammations

674. Hypinosis

Emphysæma

Hæmophilia

Hæmorrhage

Hæmoglobinuria

Pernicious Anæmia

Inflammation of Mucous
Surfaces

675. Acetone

*Diabetic Coma

Ulcer of Stomach

EMBRYOS OF**676. Filaria sanguinis hominis**

The larval form of *F. Bancroftii*

Chyluria

Hæmaturia

obstruction of blood-vessels

Elephantiasis

obstruction of lymphatic
vessels

677. Filaria medinensis

Furunculosis

678. Hæmacytozoa

Malaria (Plasmodia)

679. Spirillum Obermeyer

Relapsing Fever

680. Protozoön, Pear-shaped

Intermittent Hæmoglo-
binuria

BACILLI, COCCI, ETC.

(Taken chiefly from Muir
and Ritchie)

MICROCOCCHI (spherical
bacteria)

($1\mu = \frac{1}{1000000}$ of a metre or
 $\frac{1}{25000}$ of an inch)

671-680

MICROCOCCI—*continued***681. Staphylococcus pyogenes**

Var. aureus, albus, citreus ;
size $0.9\ \mu$, cocci arranged
in clusters

Local Inflammation in
general

Abscess

Boil

Empyæma

Endocarditis

Glandular Suppuration

Osteomyelitis

Otitis media

Pyæmia

Rheumatic Fever

Sloughs

682. Streptococcus pyogenes

Size $1.0\ \mu$, cocci arranged
in wavy chains

Severe Inflammatory
Processes

Cholera, Spasmodic

Erysipelas

Diphtheria

Membranous Pharyn-
gitis

Pneumonia

Puerperal Fever

Septicæmia

Scarlatina

683. Pneumococci

(*Diplococcus* of Fraenkel)

Small oval cocci $1\ \mu \times 0.75\ \mu$,

often arranged in pairs.

Capsule well marked

Capillary Bronchitis

Empyæma

Endocarditis

Hepatic Abscess

Meningitis

Otitis

Pleurisy

*Pneumonia, Acute

A few are found in healthy
saliva

**684. Diplococcus intracel-
lularis meningitidis
(Weichselbaum)**

Cerebro-spinal Menin-
gitis

685. Gonococcus (Neisser)

Like two beans with adja-
cent hili. Usually
contained within a
leucocyte

Gonorrhœa

Gonorrhœal Cystitis,
Endometritis, Endo-
carditis, Ophthalmia,
or Salpingitis

**686. Micrococcus tetra-
genus**

Cocci in clusters of four.
Sputa of tubercular lung
cavity

**687. Micrococcus meliten-
sis**

Size 0.5×0.5 —found in
spleen

Malta Fever

MICROCOCCI—*continued***688. *Sarcina ventriculi***

Cocci in bundles of four or multiples of four

Dilatation of Stomach

BACILLI

Rod-shaped bacteria*

689. *Bacillus anthracis*

Thick plump rods, encapsuled and granular

Anthrax

690. *Bacillus of Ducrey*

Size 1.5×0.5 minute oval rods

Soft Sore

691. *Bacillus of Lustgarten*

Syphilis (doubtful)

692. *Bacillus tuberculosis* (Koch)

Rods 3.0×0.3

Straight or slightly curved.

Stains with difficulty

Tuberculosis

693. *Bacillus of Hansen*

Resembles *B. tuberculosis*, but is shorter

Leprosy

694. *Bacillus of Friedländer*

Short capsulated rod with rounded ends

Acute Pneumonia

695. *Bacillus typhosus*

Size 2 to 4×0.5

Rounded extremities, long wavy flagella; found in

ulcers, spleen, etc., but in stools by culture only. It does not ferment glucose

Enteric Fever

696. *Bacillus mallei*

Like *B. tuberculosis*, but thicker and stains easily

Glanders

697. *Bacillus tetani*

Size 4.0×0.4 . Drumstick with slightly motile flagella

Tetanus

698. *Bacillus of Klebs-Loeffler*

3.0×0.6 . Straight or slightly curved, sometimes clubbed

Diphtheria

699. *Bacillus of Pfeiffer*

Size 1.5×0.3 . Straight with rounded ends

Influenza

700. *Bacillus, Comma*

Size 2×0.5 . Sometimes S-shape by conjugation

Cholera

BACTERIA

701. *Bacterium Coli Commune*

Resemble *B. typhosus*, but has shorter flagella. It ferments glucose. Occurs normally, but especially in—

Abdominal Abscess

BACTERIA—continued

Cystitis
Peritonitis
Pyelitis

702. *Bacterium Lactis*
Aërogenes

Normal, especially in stools
of infants

Emphysemæ of Skin (s)
Gangrene of Lung
Pneumothorax (s)
Pneumaturia
from catheter

703. *Bacillus* (unnamed)
Bell's Mania704. *Bacillus Pestis*
Plague705. *Bacillus Icteroides*
Yellow Fever706. *Streptothrix*
Maduræ
Madura Foot, etc.707. *B. Coli Dysentericum*
and *Amœbæ*
Dysentery708. *Oidium Albicans vel*
Lactis
Thrush709. *Leptothrix Buccalis*
Caries of Teeth710. *Spirochæta Buccalis*
Stomatitis, Severe711. *Actinomyces Fungus*
Actinomycosis712. *Spirillum Obermeyer*
Relapsing Fever
Filaria (see *Blood*)713. *Widal* or *Gruber-*
Widal Reaction.

Clumping of bacilli on the
addition of diluted
serum from the blood of
a patient suffering from
one of the following
diseases—

*Enteric Fever
Malta Fever
Plague
Tuberculosis

Absent in psittacosis. The
same reaction takes
place with *B. coli* com-
munis

BREATHING

714. *Slow*
Asthma, Spasmodic (s)
Ague (hot stage)
Coma (see 28)
Collapse (see 142)
Narcotic-poisoning
Shock
Tumour of Brain715. *Stertorous*
Asphyxia
Adenoids
Acute Yellow Atrophy
Coma (see 28)

STERTOROUS—*continued*

Concussion of Brain
 Epilepsy, III.
 Fractured Skull
 Hypertrophied Tonsils
 Narcotic-poisoning
 Post-pharyngeal Abscess
 'hen cluck stertor'
 Œdema of Lungs
 Paralysis of Soft Palate
 Quinsy
 Uræmia (hissing)

716. Stridulous

Aneurysm of Aorta
 Bronchus, Obstruction of
 Bronchial Glands, Enlarged
 Dryness of Vocal Cords
 Laryngismus stridulosus
 Locomotor Ataxy
 laryngeal crisis
 Paralysis of Recurrent
 Laryngeal Nerve

717. Sighing

Addison's Disease
 Anæmia of Brain
 Collapse (see 142)
 Dilatation of Heart
 Distension of Stomach
 Emotion

Fatty Degeneration of Heart
 Lesion of Medulla
 Meningitis, Simple
 Meningitis, Tubercular
 Meningitis, Cerebro-spinal
 Shock
 Spurious Hydrocephalus
 Syncope

718. Shallow

Angina Pectoris
 Collapse (see 142)
 Coma Vigil (see 27)
 Collapse of Lungs
 Capillary Bronchitis
 Fractured Ribs
 Intercostal Neuralgia
 Intercostal Paralysis
 Lead-poisoning
 Paralysis of Diaphragm
 Pleurisy, Diaphragmatic
 Pneumonia, Acute
 Pneumonia, Lobular
 Peritonitis
 Rheumatism of Intercostals
 Syncope
 Trance

719. Jerking Breathing

Asthma, Spasmodic
 Chorea

JERKING—*continued*

Hysteria
 Hydrophobia
 Hemiplegia
 Intercostal Neuralgia
 Laryngismus
 Pleurisy, Acute (onset)
 Ribs, Fractured
 Rheumatism of Inter-
 costals
 'Spinal Irritation'

720. Irregular

Apoplexy (Foudroyante)
 Collapse (see 142)
 Chorea
 Collapse of Lungs
 pause after inspiration
 Hydrocephalus, Spuri-
 ous
 Lesion of Medulla
 Meningitis, Simple
 Meningitis, Tubercular
 Shock
 Tumours of Brain

**721. Cheyne-Stokes
Breathing**

Ominous
 Aortic Aneurysm
 Apoplexy (term.)
 Cholera
 Caisson Disease
 Diphtheria
 Fatty Degeneration of
 Heart

General Paralysis
 Hæmorrhage
 Hydrocephalus
 Influenza
 Internal Spinal Menin-
 gitis
 Meningitis, Tubercular
 Meningitis, Simple
 Nephritis, Chronic
 Narcotic-poisoning
 Pneumonia
 Softening of Brain
 Tumour of Brain
 Typhic state (see 143)
 Uræmia
 Variola
 Valvular Disease

**722. Thoracic Breathing,
Marked**

Ascites
 Abdominal Tumours
 Diaphragmatic Pleurisy
 Emphysæma
 Meteorism
 Pregnancy
 Peritonitis
 Paralysis of Diaphragm
 Pericardial Effusion,
 Large

**723. Abdominal Breathing,
Marked**

Pleurisy, Double
 Spinal Paralysis
 cervical lesion

ABDOMINAL—*continued*

Strychnine-poisoning

Tetanus

724. Suffocative Breathing

Diphtheritic Laryngitis

Displacement of
Trachea

Displacement of Heart

Fatty Degeneration of
HeartForeign Body in Air-
passages

Hydrophobia

Laryngeal Growths

Œdema Laryngis

Strychnia-poisoning

Syphilitic Laryngitis

on eating

Tetanus

Tuberculous Laryngitis

on eating

DYSPNŒA

It arises when insufficient
oxygen reaches the
hæmoglobin in the air-
cells of the lung, and
vice versa

725. Dyspnœa on Exertion

Adenoids

Addison's Disease

Aortic Regurgitation

Anæmia

Bradycardia

Chlorosis

Cirrhosis of Liver

Cardiac Asthma

Dilatation of Stomach

Exophthalmic Goitre

Fatty Degeneration of
Heart

especially on ascents

Goitre

Hypertrophy of Heart

Influenza

Laryngitis, Chronic

Lymphadenoma

Leucocythæmia

Malformation of Heart

Obesity

Pernicious Anæmia

Pyrexia

Rickets

Scurvy

726. Dyspnœa, General

Aortitis, Acute

Aortic Aneurysm

Aneurysm of Heart

Ascites (late)

Asthma, Spasmodic
expiratoryAcute Ascending Para-
lysis

Ague (cold stage)

Bronchitis, Acute

Bronchitis, Capillary

Bronchorrhœa

Bronchus, Plugged or
Compressed

Beri-beri

DYSPPNŒA—*continued*

Cirrhosis of Lung
 Congestion of Lungs,
 Hypostatic
 Cancer of Larynx
 Cancer of Lung
 Collapse of Lungs
 Crico-arytenoid
 Arthritis
 Crico-arytenoid Anky-
 losis
 Conium-poisoning
 Diabetic Coma
 'air hunger'—deep, not
 rapid, breathing
 Dilatation of Heart
 Displacement of Heart
 Diaphragmatic Pleurisy
 Diaphragmatic Hernia
 Diaphragmatic Para-
 lysis
 Diaphragm, Tonic
 Spasm of
 Dissecting Aneurysm
 Endocarditis, Acute
 Emphysemæ
 expiratory
 Enteric Fever
 Fat Embolism
 Foreign Body in Air-
 tubes
 Growths, Laryngeal
 Gangrene of Lung
 Glanders
 Glossitis, Acute

Hepatic Abscess
 upper surface
 Hepatitis, Acute
 Hydatids of Lung
 Hydatids of Liver
 (large)
 Hyperpyrexial Sun-
 stroke
 Heart, Gouty
 Intercostal Rheuma-
 tism
 Intercostal Neuralgia
 Laryngeal Tuberculosis
 Laryngitis, Tertiary
 Syphilitic
 Laryngitis, Acute
 Locomotor Ataxy
 inspiratory
 Laryngitis, Diphtherial
 inspiratory
 Laryngeal Polypus
 Laryngismus
 Mitral Stenosis
 Myelitis (cervical)
 Mediastinal Abscess
 Mediastinal Tumour
 Meningitis, Spinal
 cervical portion
 Meningitis, Cerebro-
 spinal
 Measles
 Œdema of Lungs
 Paralysis of Posterior
 Crico-arytenoid
 inspiratory

DYSPNŒA—*continued*

Pneumoperitonæum
 Post-pharyngeal
 Abscess
 Pleurisy, Acute
 Pericarditis
 Pericardium, Adherent
 Peritonitis
 Pulmonary Apoplexy
 sudden
 Pneumonia, Acute
 Pneumonia, Lobular
 Quinsy
 Relapsing Fever
 Stenosis of Trachea
 Stenosis of Larynx
 Syringomyelia (insp.)
 Spasm of Larynx (insp.)
 Syphilitic Heart
 Tuberculosis, Acute
 Thrombosis of Pulmon-
 ary Artery
 Uræmia

727. Paroxysmal Dyspnœa

Aortic Aneurysm
 Asthma, Spasmodic
 Angina Pectoris (s)
 Bronchial Glands, En-
 larged
 Cardiac Asthma
 Compression of Trachea
 Cirrhosis of Kidney

Embolism of Pulmon-
 ary Artery
 Foreign Body in Air-
 passages
 Hydrophobia
 Lymphadenoma
 Laryngeal Polypus
 Laryngitis, Acute
 Laryngitis, Membran-
 ous
 Laryngitis, Diphtheritic
 Lobular Pneumonia
 Malformation of Heart
 Mediastinal Tumour
 Œdema of Lungs
 Œdema Laryngis
 Plastic Bronchitis
 Strychnine-poisoning
 Trichinosis
 Tetanus
 Tetany
 Uvula, Great Elonga-
 tion of

DECUBITUS**727a. Orthopnœa**

Acute Dyspnœa
 (See 725 to 727)

728. Right Side

Cirrhosis of Right Lung
 Collapse of Right Lung
 Right Pleural Effusion
 Right Pneumothorax (u)
 Left Acute Pleurisy

729. Left Side

Cirrhosis of Left Lung
 Collapse of Left Lung
 Left Pneumothorax
 Left Pleural Effusion
 Right Acute Pleurisy

730. Coiled up on Side

Affections of Brain and
 its Membranes
 Hepatic Colic
 Renal Colic
 Tumour of Middle Cere-
 bellar Peduncle

**731. Back with Knee
Flexed**

Appendicitis (right
 only)
 Hip Disease (one)
 *Peritonitis (both)
 Pelvic Cellulitis (one)
 Pericarditis

**732. On Knees with Head
Downwards**

Aneurysm of Heart

GAIT**733. Limping**

Appendicitis (beginning)
 Corns, etc.
 Gout
 Hip Disease
 Injuries to Limb
 Inflammatory Affec-
 tions of Limb

Intermittent Lameness,
 Charcot's

Rheumatism

Sacro-iliac Disease
 opposite shoulder raised

Sciatica

Shortening of one Limb
 (see 473)

Sprains

Unilateral Paralysis

734. Tottering

Atrophy of Brain, Senile
 Bromism
 Cerebellar Disease
 Hydrocephalus
 Idiopathic Muscular
 Atrophy
 Meningitis
 Mollities Ossium
 Paralysis agitans

735. Reeling

Alcoholism
 Ataxic Paraplegia
 Apoplexy (præm.)
 Cerebellar Disease,
 Tumour, etc.
 Compression of Brain, i.
 Friedreich's Disease
 General Paralysis of
 Insane
 Hereditary Cerebellar
 Ataxy
 Romberg very rare
 Labyrinthine Disease

736. Head Back and Feet Apart

Ascites

Cretinism

Abdominal Tumours

Obesity

Pregnancy

Pseudo-hypertrophic
Paralysis**737. Waddling**

Coxa vara, Double

Dislocation of both
Hips, Congenital
with head backPseudo-hypertrophic
Paralysis
on tip-toe**738. Foot Dragged**Multiple Neuritis
'foot drop'Spastic Paralysis
legs tremble when ground
is touchedSpasmodic Spinal Para-
lysis
jerky forward movement of
feetHemiplegia
one only* * When both feet are affected,
the gait is 'high stepping'**UNCLASSIFIED**

Chorea

slow, even, shuffling

Mercurialism
runningParalysis agitans
running with head very
forward
(See *Vertigo*, 139)**739. Romberg's Symptom**Inability to stand with the
eyes shut and the feet
close together

Ataxic Paraplegia

Friedreich's Disease

General Paralysis (s)

Hered. Cerebellar Ataxy
(x)*Locomotor Ataxy
Syringomyelia**HANDWRITING****740. Altered**Disseminated Sclerosis
vibratileDiphtheritic Paralysis
and other paralyzes when
affecting hand*General Paralysis of
Insane
upstrokes shaky, letters not
joined

Chronic Softening

Senile Atrophy

Writer's Cramp, and
other technic para-
lyses of hand*Aphasia
first degree tremulous
with omission of letters;
second degree lost, with
exception of a name or
a few words (agraphia)

741. Dictation, Inability to write from

Auditory Aphasia

742. Mirror-Writing

Aphasia

especially in the left-handed

Imbecility (s)

Infantile Cerebral

Hæmorrhage

Hysterical Aphasia (s)

743. ATAXIA, OR MAL-CO-ORDINATION

Atrophy of Brain

Ataxic Paraplegia

Alcoholism

Chorea

Disseminated Sclerosis

jerky—bilateral

Friedreich's Disease

first legs, then arms

Hereditary Cerebellar

Ataxia

Locomotor Ataxy

first legs, then arms

Multiple Neuritis (s)

Myelitis, Chronic

partial

Progressive Muscular

Atrophy

Tumour of Brain

lesion of cerebellum, pons, or (s) corpora quadrigemina

Technic Paralysis

PARALYSIS

744. Weakness in Legs

Abdominal Tumours

Barlow's Disease

or unwillingness to move them

Influenza

Lipomatosis neurotica

Locomotor Ataxy

Polymyositis

Pseudo-hypertrophic

Paralysis

Retroversion

(See *Paraplegia*, 762)

745. LOCAL PARALYSIS

First Nerve

(See *Anosmia*, 168)

Second Nerve

(See 157)

746. Third Nerve

Interpeduncular or Crus Lesion

Accommodation, Paralysis of

Diplopia, Crossed (see 148)

Diphtheria (ciliaris)

Hæmorrhage, Cerebral

Meningitis

Rheumatism

Strabismus, External

741-746

LOCAL PARALYSIS—cont.

Syphilis

Tumour, Cerebral (see
Strabismus, 274)**747. Fourth Nerve**Affection of C. quadri-
gemina

Diplopia

the false object appears to
be below and to the outer
side of the true one.
Only apparent when the
patient looks down**748. Fifth Nerve**Tumours in, or compress-
ing, pons or the nerve-
trunkPower of Mastication
Impairedthe jaw, when protruded
with the mouth open,
leans to the affected side**749. Sixth Nerve**lesion in subtentorium—
pons, medulla, posterior
fossa

Aneurysm, Intracranial

Diplopia

false object external to
true oneHæmorrhage, Cerebral
Internal Squint

Meningitis

Syphilis

Tumour

**Seventh Nerve (Portio
Dura)****750. FACIAL PARALYSIS****Central**Lesion in pons or below
nucleus

Softening

Syphilis

Tumour

Apoplexy

Cerebro-spinal Menin-
gitisDisseminated Sclerosis
(x)- Infantile Hemiplegia
Meningitis**In Canal**

Caries

Hæmorrhage

Otitis Media Interna

Rheumatism

Syphilis

Superficial

Diphtheria

Injury

Neuritis

Parotitis

Tumours

**751. Paralysis of Circum-
flex Nerve**

Inability to raise arm

Blows on Shoulder

Innominate Aneurysm

Infantile Paralysis

Technic Paralysis

747-751

752. Wrist-Drop

Leprosy
Lead-poisoning
Multiple Neuritis
Paralysis of Musculo-
spiral

753. Foot-Drop

Anterior Crural Para-
lysis
Multiple Neuritis
Myelitis, Acute
Peronæal Nerve, Para-
lysis of

754. DIFFERENTIAL**Bulbar Paralysis**

Speech, swallow, legs
(spastic)

**Acute Ascending Para-
lysis**

Successively—legs, loins,
abdomen, thorax, arms,
diaphragm, neck, swal-
low

Acute Myelitis (cervical)

Both arms

Syringomyelia (Paresis)

One hand, triceps, shoul-
der

**Amyotrophic Lateral Scle-
rosis**

Spastic paralysis of shoul-
der, arm, and hand

Infantile Paralysis

U. one leg first

**Pseudo-hypertrophic
Paralysis**

Legs, back—muscles large

**Progressive Muscular
Atrophy**

Hand first, then shoulder
and trunk—not spastic

Disseminated Sclerosis

Order: one leg, the other
leg; one arm, the other
arm

**755. Paralysis Affecting
Deglutition**

Bulbar Paralysis
Diphtheritic Paralysis
Disseminated Sclerosis
Progressive Muscular
Atrophy
Paralysis of Hypo-
glossal

Lesion of Medulla

**756. Paralysis Affecting
Articulation**

Ataxic Paraplegia
Bulbar Paralysis
rst linguals, then labials
Disseminated Sclerosis
Diphtheritic Paralysis
Facial Paralysis
labials
Friedreich's Disease
General Paralysis of
Insane
Idiopathic Muscular
Atrophy
Paralysis of Hypo-
glossal

752-756

ARTICULATION—*continued*

Progressive Muscular
Atrophy

Pseudo-bulbar Para-
lysis

Paralysis agitans
slow and laboured

Tumour etc. of pons,
medulla, and posterior
fossa; or bilateral lesion
of anterior third of in-
ternal capsule, or lesion
of portion of third left
frontal convolution (see
315)

**757. Paralysis Affecting
Hand**

Acute Ascending Para-
lysis

Amyotrophic Lateral
Sclerosis

Cervical Myelitis

Disseminated Sclerosis

Diphtheritic Paralysis

Hemiplegia

Infantile Paralysis

Infantile Hemiplegia

Lead-palsy

Multiple Neuritis

Morvan's Disease

Progressive Muscular
Atrophy

Syringomyelia

Technic Paralysis

e.g. Writer's Cramp

**758. Paralysis Affecting
Soft Palate**

Bulbar Paralysis

Diphtheria

Facial Paralysis (doubt-
ful)

**759. Paralysis of Sphinc-
ters**

(See *Micturition*, 519;
Defecation, 39)

**760. CROSSED PARALYSIS
Hemiplegia with Opposite
Facial**

Lesion of lower part of
pons. Sometimes the
sixth nerve is involved

**One Arm and Opposite Leg
Infantile Paralysis**

**Hemiplegia and Opposite
Third Nerve**

Lesion of Crus

**Hemiplegia with Opposite
Hypoglossal**

Lesions involving spinal
fibres of hypoglossal and
one-half of upper part of
cord

Caries of Upper Cervi-
cal Vertebrae

Meningitis

Syphilis

Tumours

**Hemiplegia with Opposite
Fifth**

Lesion of Pons below
Decussation

761. HEMIPLEGIA

(Paralysis of one side)

Abscess of Brain

incomplete at first

HEMIPLEGIA—*continued*

Apoplexy
 Atrophy of one Lobe
 Compression of Brain
 Cerebral Hæmorrhage
 Cerebro-spinal Meningitis (x)
 Caisson Disease
 Embolism of Cerebral Artery
 esp. middle cerebral
 Hæmatoma of Dura Mater
 Hysteria
 Internal Nodes
 Infantile Hemiplegia
 Lesion of Crus, Pons, Internal Capsule, or Cortex
 Meningitis simplex (x)
 Softening of Brain
 Syphilis
 Tumour of Brain
 gradual
 Unilateral Lesion of Upper Cervical Cord (rare)
 If hemiplegia affects arm only, or arm and face, the lesion is beneath the motor part of the cortex

762. PARAPLEGIA

Acute Ascending Paralysis, i.
 Aneurysm of Abdominal or Descending Aorta

Apoplexy, Spinal
 Ataxic Paraplegia
 gradual and spastic
 Beri-beri
 Caisson Disease
 Cerebro-spinal Meningitis
 Chronic Atrophic Spinal Paralysis
 Compression of Cord, Slow
 Caries of Spine
 Dislocation of Spine
 Diphtheritic Paralysis
 subsequently affecting

763.

Fracture of Spine
 Hydrocephalus (s)
 Hysteria
 Hyperæmia, Spinal incomplete
 Infantile Paralysis
 Multiple Neuritis
 Myelitis, Acute or Chronic
 Meningitis, Internal Spinal
 Purulent Spinal Pachymeningitis
 Primary Spastic Paraplegia
 Reflex Paraplegia (x)
 worms, etc.
 Spina bifida (s)
 Spinal Meningeal Hæmorrhage
 usually incomplete

PARAPLEGIA—*continued*

Tumours in Spinal Canal

763. DIPLEGIA, OR BILATERAL PARALYSIS

(Lesion of upper cervical portion of spinal cord. Bilateral cerebral lesions. Lesion of medulla or of centre of pons)

Acute Ascending Paralysis, Late

Basilar Meningitis (x)

Diphtheria

Encephalitis

General Paralysis of Insane

Hydrocephalus, Chronic

Hæmorrhage, Cerebral

Infantile Diplegia

Multiple Neuritis

Pseudo-bulbar Paralysis

Spinal Apoplexy

Spinal Tumours (as above)

Tumours, Brain (as above)

764. Amyosthenia

A sudden temporary loss of power in arm or leg

Hysteria

765. Paralysis of a Single Nerve

Neuritis (u)

REFLEXES

EYE REFLEXES

(see *Eye*, 277)

766. CUTANEOUS REFLEXES

Diminished or Lost

Asphyxia

Apoplexy, Severe

Apoplexy, Spinal

Anæsthesia, Peripheral

Acute Ascending

Paralysis

Chorea

Coma

Catalepsy, Severe

Cholera, II.

Disseminated Sclerosis

Hemiplegia

Hysteria

plantar only

Locomotor Ataxy

Myelitis

Narcotic-poisoning

Peripheral Paralysis

Progressive Muscular

Atrophy

Spinal Paralysis, Acute

Spinal Paralysis,
Chronic Atrophic

Increased

Amyotrophic Lateral
Sclerosis

Angular Curvature

762-766

CUTANEOUS—*continued*

Ataxic Paraplegia
 Locomotor Ataxy, I. (s)
 Meningitis, Internal
 Spinal
 Primary Spastic Para-
 plegia
 Pachymeningitis
 Spastic Cerebral Para-
 plegia
 Strychnine-poisoning

TENDON REFLEXES

767. Knee-Jerk

(Westphal's sign)

Lost

Acute Ascending Para-
 lysis
 Anterior Crural Para-
 lysis
 Adiposis dolorosa
 Beri-beri
 Cerebro-spinal Menin-
 gitis
 Diabetic Sclerosis
 Diphtheritic Paralysis
 Friedreich's Disease
 General Paralysis of
 Insane
 Infantile Paralysis
 if quadriceps extensor is
 affected
 Idiopathic Muscular
 Atrophy
 *Locomotor Ataxy
 Leprosy

Multiple Neuritis

if anterior crural nerve is
 involved

Myelitis, Descending
 Pernicious Anæmia (s)
 Progressive Muscular
 Atrophy

if quadriceps is involved

Pseudo-hypertrophic
 Paralysis (very late)
 Syringomyelia (late)
 Sciatica (s)

Transverse Softening of
 Cord

Tumour of Middle
 Lobe of Cerebellum

Atrophic Paralysis in
 General

768. Exaggerated (In-
 creased Myotatic
 Irritability)

Amyotrophic Lateral
 Sclerosis

Ataxic Paraplegia

Apoplexy

Cancer of Stomach

Compression of Cord,
 Slow

Disseminated Sclerosis

Embolism of Brain

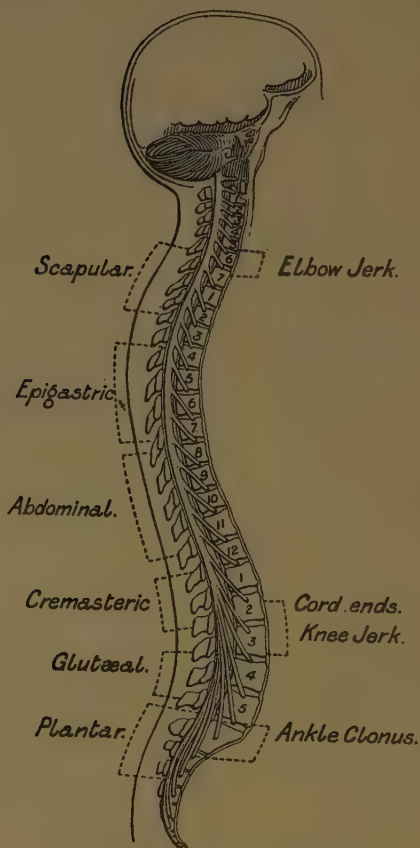
Hereditary Cerebellar
 Ataxy

Hysteria

Myelitis, Chronic

Morvan's Disease

Neurasthenia



LOCALISATION OF REFLEXES

LOCALISATION OF CORD LESIONS

REFLEXES WITH THE SPINAL NERVES INVOLVED

Name	Irritated area	Result	Nerves
Plantar reflex	Sole of foot . . .	Flexion of toes Jerking up foot and leg.	} 1st to 3rd sacral 4th and 5th lumbar 1st and 2nd lumbar 8th to 12th dorsal 6th cervical to 2nd dorsal
Glutæal .	Skin of buttock . .	Contraction of glutei . .	
Cremasteric .	Inner side of thigh .	Retraction of testicles . .	
Abdominal .	Side of abdomen . .	Contraction of rectus . .	
Scapular .	Interscapular region .	Contraction of posterior fold of axilla	
Epigastric .	Skin of lower part of side of thorax	Contraction of rectus . .	4th to 7th dorsal
TENDON REFLEXES			
Knee-jerk .	Ligamentum patellæ .	Sudden extension of leg . .	2nd and 3rd lumbar
Ankle-clonus.	Ball of foot	Rhythmic contractions of calf	1st and 2nd sacral
Elbow-jerk .	Triceps tendon, with fore- arm semi-flexed	Rhythmic contractions . .	5th to 7th cervical

TENDON—continued

Spasmodic Spinal Paralysis

Syringomyelia

Strychnine-poisoning

Tetanus

Tumour of Brain

Tumour of Cord

Ulcer of Stomach

769. Chorea Knee Phenomenon

The leg remains full extended for a second or two, the foot and toes jerking

770. Paradoxical Contraction

Tonic contraction of anterior tibials upon the physician suddenly flexing the foot on the leg

Excessive Spasticity of Legs

771. Jaw-Jerk**772. Elbow-Jerk and Bier-nacki's Sign****773. Wrist-Jerk****774. Tendo-Achillis-Jerk****775. Ankle-Clonus**

Contractions 6 to 9 per second. In general,

ankle-clonus is present where the knee-jerk is exaggerated

(See 768)

776. Kernig's Sign

With the patient sitting on edge of bed there is great difficulty in forced extension of the knee-joint. The arms have been known to give a similar sign

Meningitis, Cerebro-Spinal

Meningitis, Spinal

777. BABINSKI'S TOE-REFLEX

Extension, instead of flexion, of the great toe on titillation of the sole. This is the normal condition in the new-born

Present in—

Lesions of Pyramidal Tract

Friedreich's Disease

Locomotor Ataxy

Spasmodic Paraplegia

Spinal Paralysis in General

Absent in—

Hysteria

Infantile Paralysis

* * Some doubt has been thrown upon the value of this sign by the observations of Wood (see Abstract in 'Medical Review,' July 1900)

768-777

SPASM AND RIGIDITY

CLONIC SPASMS

778. Tremor and Subsultus

Fibrillary tremor implies
exhausted muscles

Alcoholism, Chronic

Apoplexy

Abscess of Brain

Ataxic Paraplegia
face

Aura epileptica

Anæmia of Brain

Absinthism (x)

upper extremities only

Bell's Mania

Chorea

Compression of Brain

Congestion of Brain

Disseminated Sclerosis

Delirium Tremens

Enteric Fever (third
week)

Epilepsy, II.

Encephalitis

General Paralysis of
Insane
face

Hyperpyrexia

Hydrocephalus, Spuri-
ous

Hysteria

Intestinal Irritation

Idiopathic Muscular
Atrophy
except peronæal form

Jaundice

Myelitis

Meningitis

Neuritis, I.
local

Neuroma

Petit Mal

Progressive Muscular
Atrophy

Paralysis agitans
head unaffected during
sleep

Prostration (see 141)

Rheumatism, Acute

Round-worms

Syringomyelia

Spinal Meningitis, Int.

Spinal Concussion

Spinal Apoplexy, I.

Spasmodic Spinal Para-
lysis

Spinal Paralysis,
Chronic Atrophic

Strychnine

idiosyncrasy or overdose

Tumour of Brain

esp. of cerebellum, pons,
and c. quadrigemina

Tumour of Cord

Typhic state (see 143)

Uræmia

779. Intention Tremor

(Tremor on voluntary
movement)

Alcoholism, Chronic

Disseminated Sclerosis

778-779

INTENTION TREMOR—*cont.*

Exophthalmic Goitre

Hysteria

Hereditary Cerebellar
Ataxy

Mercurialism

upper limbs first

Plumbism

Tremor occurs in health
after unaccustomed exer-
cise and after abuse of
tea or tobacco**780. Jactitation and Jerk-
ing**Chorea, Major and
MinorChorea, Dubini's
like electric contractionsChorea, Post-hemi-
plegicChorea, Huntington's
the movements can be
arrested by a strong
effort of the will

Concussion of Spine

Cerebro-spinal Menin-
gitisCompression of Cord,
Slow

Hysteria

Hæmorrhage, Extensive

Hereditary Cerebellar
Ataxy

Infantile Hemiplegia

Locomotor Ataxy

Morvan's Disease

Myoclonus Multiplex

Occupation Neurosis
(see 13)

Pericarditis, Severe

Sequela of Fractured
Limb

Syringomyelia

Strychnine

Tetanus

Typhic state

781. Salaam Convulsions

Dentition

Epilepsy

Menière's Disease

Spasmus nutans

782. Convulsions

Absinthism

Anæmia of Brain

Abscess of Brain

Asphyxia (term.)

Aortic Stenosis

Acute Yellow Atrophy

Addison's Disease

Apoplexy (cortical)

Ague

cold stage in children

Bradycardia

Compression of Brain

Cerebro-spinal Menin-
gitis

Cirrhosis of Kidney

Coal-gas-poisoning (s)

Cysticerci of Brain

CONVULSIONS—*cont.*

*Dentition

Disseminated Sclerosis
(late)

*Epilepsy

Exostosis of Skull

Ergotism, Spasmodic

Exanthemata (children
—onset)

this represents the rigor of
adults

Enteritis, Acute (Child-
ren)

Encephalitis

Frights

General Paralysis of
Insane

Hydronephrosis,
Double

Hydrocephalus, Spuri-
ous

Hydrocephalus,
Chronic

Hyperpyrexia

Hæmatoma of Dura
Mater

Hydrophobia (tetanoid)

Hæmorrhage

Hyperæmia of Brain

Hypertrophy of Brain

Indigestion

Intussusception

Irritating Scar

Infantile Paralysis
(onset)

Infantile Hemiplegia
(onset)

Jacksonian Epilepsy

muscular area limited,
consciousness usually
retained

Jaundice (x)

Lead-poisoning

Myelitis, Acute

Meningitis

Nephritis, Acute (late)

Pregnancy

Puerperal State

Pneumonia, Acute
(children)

Pachymeningitis

Poisoning by—

arsenic (term.), brucia,
hydrocyanic acid, pi-
crotoxine, strychnine,
tobacco, and narcotico-
irritants in general

Round-worms and Tape-
worms

Spinal Meningeal
Hæmorrhage

Spina bifida
about to burst

Softening of Brain

Syphilitic Nodes

Starvation

Stokes-Adams Disease

Sunstroke

Tetanus

Tumour of Brain

esp. when near cortex

CONVULSIONS—*cont.*

Thrombosis of Brain
Thickening of Skull
Uræmia

783. Athetosis

Sometimes described as a disease

Lesion of lenticular ganglion or near optic thalamus. It consists of slow successive spasmodic movements in all directions, chiefly of the fingers, but often involving the wrist, elbow, and toes, rarely, the face

Embolism of Brain
Hæmorrhage, Cerebral (x)

Hysteria
Hemiplegia
Infantile Hemiplegia
Injuries of Brain
Tumour of Brain

784. Hiccough (Singultus)

Addison's Disease
Alcoholism
Cancer of Stomach
Cholera
Collapse (see 142)
Dysmenorrhœa
Dyspepsia
Distended Stomach
Diaphragmatic Pleurisy
Enteric Fever, III.
Gangrene of Lung

Hydrocephalus
Hepatitis
Hæmorrhage
Hysteria
Intestinal Obstruction
Meningitis
Mental Emotions
Peritonitis
 esp. diaphragmatic
Pregnancy
Pancreatic Disease
Septicæmia
Strangulated Hernia
Tumour of Brain
Typhic state (143)
Uræmia

Nystagmus (see *Eye-balls*, 269)

785. Carphology (Picking bedclothes)

Typhic state (see 143)

TONIC SPASM

786. Trousseau's Phenomenon

Sudden violent spasm of muscles of fore-arm upon pressure over median nerve and brachial artery

Tetany

787. Cramps

Cholera, Asiatic
Cholera, Sporadic
Cancer of Intestine
Constipation

CRAMPS—*continued*

Colic
 Diabetes
 Dilatation of Stomach
 Ergotism
 Gout
 Gastro-Intestinal Irritation
 Hernia
 Intussusception
 Internal Spinal Meningitis
 Lead-poisoning
 Occupation Neurosis
 Pregnancy
 Progressive Muscular Atrophy
 Poisoning by Arsenic and Antimony
 Syringomyelia
 Sciatica
 Tumours of Cord

788. Rigidity

Early rigidity disappears during sleep; late rigidity is persistent

Amyotrophic Lateral Sclerosis (late)
 Bulbar Paralysis (late—limbs)
 Cerebro-spinal Meningitis
 Cerebellar Disease (nuchal)

Compression of Cord, Slow (late)

Catalepsy

universal—'waxy'

Disseminated Sclerosis (late)

Epilepsy, II.

Embolism of Brain

Ergotism, Spasmodic

External Spinal Pachymeningitis

Hemiplegia, Infantile esp. adductors and flexors

Hysteria

Hystero-epilepsy

Lateral Sclerosis, Primary

Myelitis, Acute

Meningitis, Internal Spinal

back and limbs

Meningitis, Tubercular

Meningitis, Spinal Tubercular

Paralysis agitans (late)

Primary Spastic Paraplegia

clasp-knife rigidity, pelvis moves with leg

Spinal Meningeal Hæmorrhage

Spastic Cerebral Paraplegia

Spasmodic Spinal Paralysis

Thrombosis of Brain

RIGIDITY—continued

Thomsen's Disease

(u) legs; (s) arms—transient

Tumour of Spine

Tumour of Brain

Tetanus

Tetany

esp. fingers and toes

789. Trismus

Tonic closure of lower jaw

Abscess near Masseter

Cerebro-spinal Meningitis

Dentition

esp. of wisdom-teeth

Dental Irritation

Epilepsy (s)

Facial Neuralgia

Hysteria

Intestinal Irritation

esp. worms

Strychnine-poisoning
(early)

*Tetanus

Tetany

Uræmia (x)

790. Emprosthotonos

(body curved forwards)

Cerebro-spinal Meningitis

Intrameningeal Spinal
Hæmorrhage, i.**791. Opisthotonos**

(body curved backwards)

Hysterical Convulsions
(s)

Internal Spinal Meningitis

Strychnine

*Tetanus

Uræmia

792. Spasm of Swallow

*Hydrophobia

Hysteria

Lyssaphobia

Strychnia

Tetanus

**793. Spasm of Inspiratory
Muscles**

Epilepsy

Hydrophobia

Tetanus

Tetany

794. Laryngismus

Aortic Aneurysm

Epilepsy, i.

Hydrophobia (Clonic)

Intrathoracic Tumour

Measles

Rickets

**794a. Spasm of Spinal
Accessory**

Spasmus nutans

Torticollis, Spasmodic

788-794a

**ELECTRICAL
REACTION****795. Reaction of Degeneration (R. D.)**

Increased galvanic and
diminished faradic con-
tractility

A.C.C. = K.C.C.

Amyotrophic Lateral
Sclerosis (s)

Atrophic Spinal Para-
lysis, Chronic

Bulbar Paralysis

Compression of Cord

Diphtheritic Paralysis

Injuries to Cord

Infantile Paralysis

Idiopathic Muscular
Atrophy

Lead Paralysis

Myelitis

Neuritis, II.

Pressure on Nerve-
trunks

Peripheral Paralysis in
general

Rheumatic Paralysis

Spinal Paralysis of
Adults, Acute

Traumatic Paralysis

**796. GALVANIC
IRRITABILITY****Diminished**

Amyotrophic Lateral
Sclerosis

Chorea

Joint Atrophies

Locomotor Ataxy

Progressive Muscular
Atrophy

Poliomyelitis, Chronic
Anterior

some muscles

Pseudo-bulbar Paraly-
sis

Simple Muscular
Atrophies

Syringomyelia

Increased

Hemiplegia

Locomotor Ataxy

Peripheral Neuritis, I.

Tetany

(See *R. D.*, 795)

INTELLECT**797. Dull (Hebetude)**

Adenoids

Atrophy of Brain

Anæmia of Brain

Absinthism

Alcoholism, II.

Bromism

Cretinism

Chorea

Cerebro-spinal Menin-
gitis, I.

Cervico-occipital
Neuralgia

HEBETUDE—*continued*

Dysentery
 Disseminated Sclerosis
 Enteric Fever
 Encephalitis
 Effusion into Ventricles
 General Paralysis of
 Insane
 Hereditary Cerebellar
 Ataxy
 Hypertrophy of Brain
 Hyperpyrexia
 Hæmatoma of Dura
 Mater
 Hydrocephalus,
 Chronic
 Hydrocephalus, Spuri-
 ous
 Infantile Hemiplegia
 Meningitis, Chronic
 Myxcedema
 Pseudo-hypertrophic
 Paralysis
 Recklinghausen's
 Disease
 Relapsing Fever
 Softening of Brain
 Starvation
 Senile Atrophy
 Thrombosis of Cerebral
 Arteries
 Typhus
 from commencement
 Tumour of Brain
 Uræmia

798. Loss of Memory
(Amnesia)

Atrophy of Brain,
 Senile
 Arterio-sclerosis of
 Brain
 Bromism
 General Paralysis of
 Insane
 Hydrocephalus
 Hæmatoma of Dura
 Mater
 Multiple Neuritis
 Meningitis, Chronic
 Syphilitic Disease of
 Brain
 Thrombosis of Cerebral
 Vessels
 Tumour of Brain
 esp. of temporo-sphenoidal
 lobe

799. Illusions or Hallucin-
ations

Aura epileptica
 Absinthism
 Bell's Mania
 Delirium Tremens
 Ergotism
 Exanthemata, Acute
 General Paralysis of
 Insane
 Hyperpyrexia
 Hydrophobia
 Hyperæmia of Brain
 Insanity

ILLUSIONS—*continued*

Multiple Neuritis

Myxœdema

Narcotics

Typhic state (see 143)

Tumour of Brain

esp. of temporo-sphenoidal
lobe**800. Delusions**

Delirium Tremens

Dementia

General Paralysis of
Insane

Hysteria

Hypochondriasis

Myxœdema (late)

Mania

Melancholia

801. DeliriumAcute Yellow Atrophy
(muttering)Anæmia of Brain,
Chronic

Absinthism

Bell's Mania

Cerebral Hæmor-
rhage, II.Capillary Bronchitis
(late)

Chorea, Severe

✓ Cerebro-spinal Menin-
gitisCholangitis, Chronic
Fibrous

Dysentery

Delirium a potu

Delirium Tremens

I. noisy; II. mumbling

Erysipelas

Exanthemata, Acute
præm. in children

Enteric Fever

Encephalitis

Glanders

Gangrene of Lung
(muttering)

Hyperæmia of Brain

Hyperpyrexia (see 833)

Hydrophobia

Hæmorrhage

Intermittent, Pernicious

Influenza

Jaundice

Labyrinthitis, Acute

Myocarditis, Acute

Mania

Measles

Meningitis

Narcotic-poisoning, I.

Pneumonia, Acute

Rheumatism, Acute

Remittent Fever

Septicæmia

Scarlatina

Tuberculosis, Acute

Trichinosis

Typhus (muttering)

Typhic state

Uræmia

DELIRIUM—*continued*

Variola

Weil's Disease

802. Loss of Consciousness

Aortic Stenosis

Addison's Disease

Atrophy of Heart

Anæsthetics

Anæmia of Brain

Bell's Mania

Collapse

incomplete

Concussion of Brain

rarely complete

Catalepsy

incomplete

Epilepsy, II.

except Jacksonian epilepsy

Embolism of Brain

Ergotism, Spasmodic

Fatty Degeneration of
Heart

Gouty Heart

Hysteria

Hystero-epilepsy

Injuries to Head

Internal Hæmorrhage

Laryngeal Vertigo

momentary

Malformation of Heart

Petit Mal

Syphilitic Heart

Stokes-Adams Disease

Syncope

Shock

Trance

Typhic state

Tumour of Brain

(See *Coma*, 28; *Faintness*, 137)**EMOTIONS****803. Excitement and Exaltation**

Anæmia of Brain

Bell's Mania

Friedreich's Paralysis

General Paralysis, I.
sometimes II.

Hyperæmia of Brain

Mania, Acute

Tumour of Temporo-
sphenoidal Lobe

Action of—

Alcohol, I.

Amylene

Aniline

Chloroform

Creasote

Nitroglycerine

Turpentine

(See *Delirium*, 801)**804. Depression and Melancholy**

Atony of Stomach

Angina Pectoris

Bulbar Paralysis

Bromism

Dysentery

DEPRESSION AND MELANCHOLY—*continued*

Disseminated Sclerosis

Duodenal Catarrh

Enteroptosis

Gastritis, Chronic

General Paralysis, II.
sometimes I.

Hypochondriasis

Hydrophobia

Hysteria

Iodism

Membranous Colitis

Menopause

Melancholia

Mercurialism

Pernicious Anæmia

Poisoning by—

Aconite

Calabar Bean

Hemlock

Lobelia

Tobacco

Tartar Emetic

Tumour of Brain

esp. temporo-sphenoidal
lobe

805. Alternating

Chlorosis

Hysteria

Menopause

Softening, Chronic

806. Change of Temper

Aura epileptica

Exophthalmic Goitre

General Paralysis

Mucous Disease

Melancholia

Pregnancy

807. Irritability

Anæmia of Brain

Catalepsy (præm.)

Duodenal Catarrh

Dilatation of Heart

Encephalitis, I.

Gout

Hyperæmia of Brain

Hypertrophy of Brain

Jaundice (see 230)

*Lithæmia

Mucous Disease

Myxœdema (late)

Menopause

Mental Strain

Malformation of Heart

VOICE

808. Aphonia (loss of
voice)

Aortic Aneurysm

Acute Ascending Para-
lysisBronchial Glands, En-
larged

Coryza

Contracted Cicatrices on
Vocal Cords

Cholera

Diphtheritic Laryngitis

Exhaustion

804-808

APHONIA—*continued*

Exophthalmic Goitre
 Excessive Vocal Exer-
 tion
 Growths, Laryngeal
 Hysteria
 Insanity
 Lead Palsy
 Lupus of Throat
 Laryngitis, Chronic (s)
 Mediastinal Tumour
 or cracked
 Œdema Laryngis
 Post-pharyngeal
 Abscess
 Paralysis of Adductors,
 Bilateral
 or weak
 Rheumatoid Arthritis (s)
 Syphilis
 Trichinosis
 Violent Emotion

809. Weak

Bulbar Paralysis
 Cholera
 Prostration
 Paralysis of Recurrent
 Laryngeal
 monotonous, if both;
 cracked on exertion, if
 only one
 Paralysis of Adductors,
 Bilateral
 Tracheotomy
 or other open wound of
 trachea
 Tubercular Laryngitis

810. Hoarse

Alcoholism
 Acromegaly
 Aortic Aneurysm
 Bronchitis, Acute, 1.
 Chorditis tuberosa
 Cancer of Larynx
 Congestion of Larynx
 Crico-arytenoid Arthri-
 tis
 Crico-arytenoid Anky-
 losis
 Cholera
 Diphtheritic Laryngitis
 Exophthalmic Goitre
 Enlarged Bronchial
 Glands
 Follicular Pharyngitis
 Granular Pharyngitis
 Growths, Laryngeal
 Laryngitis, Acute
 Laryngitis, Chronic
 Laryngitis, Syphilitic
 Laryngitis, Tubercular
 Laryngitis, Membran-
 ous
 Measles
 Myxœdema
 leathery
 Pachydermia Laryngis
 Perichondritis Laryngea
 Post-pharyngeal
 Abscess
 Paralysis of Superior
 Laryngeal Nerve

HOARSE—*continued*

Syphilis

Tumour of Larynx

811. Nasal

Adenoids

Bulbar Paralysis

Coryza

Diphtheritic Paralysis

Hay Asthma

Hypertrophied Tonsils

Pharyngitis, Acute

Polypus, Nasal

Paralysis of Soft Palate

Post-pharyngeal

Abscess

Quinsy

Septum, Excentric

Typhus (prodr.)

Variola (prodr.)

812. High-Pitched

Cleft Palate

Hereditary Cerebellar

Ataxy

guttural or cracked

High Palatine Arch

Paralysis of both Ab-
ductors

813. Shrieks and Cri

Hydrencéphalique

Anæmia of Brain

Epilepsy (onset)

Hydrocephalus

Hydrocephalus, Spuri-
ous

Hysterical Convulsions

Night Terrors

Nightmare

Pain

Tubercular Meningitis

814. Cry of Infants

Colic

furious

Collapse of Lung

whining

Dyspnœa, Acute

absent

Diphtheria, II.

aphonic

Earache

continuous

Hereditary Syphilis

hoarse, high-pitched

SPEECH

815. Mutism

Aphasia, Motor

except a few sounds

Complete Deafness

supervening before
the sixth year

Double Bulbar Para-
lysis

Glossitis, Acute

Hysteria

Idiocy

Softening of Brain

Thrombosis or Embo-
lism of Middle Cere-
bral Artery

**816. Inability to Repeat
Sounds**

Auditory Aphasia

817. Speech Indistinct

Alcoholism
 Bromism
 Glossitis
 Hysteria (s)
 Mumps
 Mouth, Dryness of
 Toothlessness
 Typhic state

(See *Paralysis of Articulation*, 756)

818. Speech Interrupted

Acute Dyspnœa (see 725)
 Chorea
 Hereditary Cerebellar Ataxy
 Stammering

COUGH**819. Dry or Hacking**

Adenoids
 Acid Fumes
 Acute Bronchitis, I.
 Bronchial Catarrh, I.
 Catarrhe sec
 Enteritis, Chronic
 Foreign Body
 Gastritis, Chronic
 Hepatoptosis
 ceases on lying down
 Hay Asthma
 Hysteria
 Hypertrophy of Heart
 Hepatitis, Acute

Influenza, I.

Laryngitis, Chronic

Naso-pharyngeal
 Catarrh

Pleurisy, Acute

Pneumonia, Acute, I.

Relaxed Uvula

820. Hoarse or Barking

Aneurysm of Aorta
 brassy

Bronchitis, Acute, I. (s)

‘Barking Cough of Puberty’

Diphtheritic Laryngitis, I.

Hysteria

Hydrophobia

Hooping-Cough, I.

Irritation of Stomach

Laryngitis, Acute

Laryngitis, Spasmodic

Laryngitis, Membranous

Laryngitis, Tubercular

Laryngitis, Syphilitic

Mediastinal Tumour

Masturbation (s)

Measles

Œdema Laryngis, I.

Polypus of Larynx

Pharyngitis, Granular

Perichondritis Laryngea

Pneumothorax
 metallic

Typhus

821. Paroxysmal

Bronchitis, Plastic
 Bronchorrhœa
 Bronchiectasis
 Bronchial Glands En-
 larged
 Cirrhosis of Lung
 Caries of Dorsal Spine, I.
 Gallstones (s)
 Hysteria
 Hooping-Cough
 Laryngeal Vertigo
 Mediastinal Tumour
 Polypus of Larynx
 Tonsils, Hypertrophied
 Uvula, Relaxed
 Ulcer of Epiglottis

822. Unclassified

Capillary Bronchitis
 Congestion of Lungs,
 Mechanical
 Collapse of Lungs
 continual and powerless
 Cancer of Lungs
 Diphtheritic Paralysis
 on eating
 Emphysemæa
 Enteric Fever
 Empyæma
 chiefly on movement
 Hydatids of Lung
 Hydatids of Liver,
 Large
 Hyperæmia of Lungs,
 Acute

Leucocythæmia
 Lesion of Medulla
 Measles
 Mediastinal Tumour
 Malformation of Heart
 Nervousness
 Œdema of Lungs
 with retching
 Post-pharyngeal
 Abscess
 Polypus or Foreign
 Body in Ear
 Phthisis
 Pharyngitis, Acute
 Polypus of Nose,
 Fibrous
 Pregnancy
 Pressure on Pneumo-
 gastric, Recurrent or
 Sympathetic Nerve
 Tuberculosis, Acute
 Tubercular Laryngitis
 on eating
 Typhus
 Woillez's Disease

823. Inability to Cough

Coma
 Diaphragmatic Pleurisy
 Fractured Ribs
 Narcotic-poisoning
 Prostration
 Paralysis of Respiratory
 Muscles
 Paralysis of Adductors

ODOUR**824. Sweet Breath**

- *Diabetes
- Menstruation (s)
- Pyæmia
- Septicæmia

825. Bitter-Almond Breath

- Hydrocyanic-acid-poisoning

826. Foul Breath

- Alcoholism
- Bromism
- Bronchiectasis
- Bronchorrhœa
- Cancrum Oris
- Caries of Jaw, Nose, or Teeth
- Cancer of Mouth or Gullet
- Diphtheria
- Fæcal Accumulation
- Follicular Tonsillitis
- Gastritis, Acute and Chronic
- Gangrenous Sore-Throat
- *Gangrene of Lung intense
- Glossitis
- Mercurialism
- Mucous Disease
- Measles

Necrosis of Jaw or Nose

Ozæna

Pyopneumothorax with Fistula

Phosphorus-poisoning

Salivation

Stomatitis

Scurvy

Typhus

Teeth, Foul

Uræmia

Variola

827. PERSPIRATION ODOROUS

Addison's Disease
like that of a negro

Favus (mousy)

Glanders (sour)

Hepatic Abscess
(Liverish)

Jaundice (musky)

Osmidrosis (cheesy)

Peritonitis (musky)

Rheumatism, Acute
(sour)

Uræmia (ammoniacal)

Variola ('greasy')

828. URINE ODOROUS

Chyluria (?) (Milky)

Cystitis (Ammoniacal)

Diabetes (Apple-like)

Ingestion of Turpentine
(like Violets)

TEMPERATURE**829. Subnormal**

- Addison's Disease
- Alcoholic Coma
- Asthma, Spasmodic
- Apoplexy (s)
- *Cholera, Asiatic, to 94°
- Cholera, Sporadic, to 96°
- Collapse (see 142)
- Collapse of Lungs
- Cancer
- Cretinism
- Chloral-poisoning
- Carbolic-acid-poisoning
- Cirrhosis of Lungs
- Diabetes
- Enteric Fever
 - mornings only—3rd week
- Hæmorrhage
- Heart Disease, Chronic
- Intestinal Obstruction
- Myxœdema (94°–98°)
- Melancholia
- Malformation of Heart
- Phthisis
 - morning (s)
- Pneumonia, Acute
 - after crisis (s)
- Relapsing Fever
 - defervescence
- Starvation
- *Sclerema Neonatorum
 - sometimes to 72°
- Shock

Tubercular Meningitis
(late x)

Trance

Uræmic Attack (s)

* * Beware of mistaking the
action of antipyretic
drugs

830. Local Lowering

- Aura epileptica
 - one extremity
- Compression of Cord
- Chronic Atrophic
Spinal Paralysis
- Hysterical Œdema
- Paralysed Limb
- Scleroderma
- Spinal Paralysis of
Adults, Acute
- Spinal Apoplexy (limbs)
- Syringomyelia
- Transverse Softening of
Cord

RAISED**831. Pyrexia, Marked**

- All inflammatory diseases
and the acute exanthemata
- Abscess, Acute
- Ague
 - cold stage, 100°–101°. Hot
stage, 105°
- Appendicitis
- Aortitis, Acute
- Bell's Mania, II.
- Bronchitis, Acute

RAISED—*continued*

Bronchitis, Capillary
 Cancrum Oris
 Cystitis
 Cerebro-spinal Meningitis
 Dengué
 Dentition
 Diphtheria
 Dysentery
 Erysipelas
 Extravasation of Urine
 Endocarditis, Acute
 Enteritis, Acute
 Encephalitis
 Empyæma
 Febricula
 Gastritis, Erythematous, Acute
 Glaucoma, Acute
 Glandular Fever
 Glanders
 Gout
 Glossitis
 Hepatitis, Acute
 Hepatic Abscess
 Hooping-Cough (invasion)
 Hydrocephalus, Spurious
 Hystero-epileptic Seizure
 Herpes Pharyngis
 Influenza

Labyrinthitis, Acute
 Mania
 Mumps
 Myelitis, Acute
 Measles
 Mediastinal Abscess
 Meningitis, Simple
 Meningitis, Tubercular
 Meningitis, Spinal
 Myocarditis, Acute
 Nephritis, Acute
 Ophthalmia
 Oöphoritis
 Otitis
 Orchitis
 Pelvic Abscess
 Pelvic Peritonitis
 Pelvic Cellulitis
 Phlegmasia dolens
 Pancreatitis, Acute
 Polymyositis
 Peliosis rheumatica
 Psittacosis
 Plague, II.
 Phosphorus-poisoning, Acute
 Post-pharyngeal Abscess
 Pneumonia, Acute
 Pneumonia, Lobular
 Pyelitis, Acute
 Pleurisy, Acute
 Paralysis, Infantile (onset)

RAISED—*continued*

Perinephritis
 Pericarditis
 Perihepatitis
 Peritonitis, Acute
 Periproctitis
 Phlebitis, Acute
 Phthisis
 Puerperal Septicæmia
 Quinsy
 Renal Embolism
 Roseola
 Rötheln
 Rheumatism, Acute
 Rheumatism, Gonor-
 rhœal
 Relapsing Fever
 Remittent Fever
 Scarlatina
 Splenitis
 Syphilitic Lung
 Spinal Concussion, II.
 Typhus
 Trichinosis
 Tetany
 severe paroxysms
 Tonsillitis
 Tabes mesenterica
 Tuberculosis, Acute
 Tetanus
 Typhic state (see 143)
 Urticaria febrilis
 Vaccinia
 Varicella

Variola, I., III.
 Woillez's Disease
 Weil's Disease
 Yellow Fever
 Yellow Atrophy, Acute

832. PYREXIA, SLIGHT OR
INCONSTANT

Apoplexy, II.
 Bronchiectasis
 Coryza
 Cirrhosis of Lung
 Cirrhosis of Liver
 hypertrophic variety
 Diarrhœa, Irritative
 Exophthalmic Goitre
 Gonorrhœa
 Hæmophilic Arthritis
 Hay Asthma
 Herpes zoster
 Hepatic Colic
 Hyperæmia of Lungs,
 Acute
 Hydrophobia
 Hæmorrhage (præm.)
 Infantile Hemiplegia
 Landry's Paralysis,
 (onset)
 Laryngitis, Acute
 Laryngitis, Spasmodic
 Leucocythæmia
 Lymphadenoma
 esp. in the young
 Metritis

PYREXIA—*continued*

Mollities Ossium
 Peritonitis, Chronic
 Pernicious Anæmia
 Renal Calculus
 Variola, II.

833. Hyperpyrexia (temp. 106 and upwards)

Occurs occasionally in the following diseases

Acute Yellow Atrophy
 Enteric Fever
 Erysipelas
 Hysteria (x)
 Influenza
 Injury to Cord
 cervical portion
 Intermittent, Severe
 Meningitis
 Pneumonia, Acute
 Purulent Spinal Pachymeningitis
 Remittent Fever
 Rheumatism, Acute
 Relapsing Fever
 Sunstroke
 Scarlatina
 Tetanus
 Tumour of Pons
 Yellow Fever
 Uræmia

834. Remittent Type, or Morning Fall

(When the remission is of about one degree the

expression 'continued fever' is employed, but the term is used with little precision)

Appendicitis
 Cirrhosis of Lung
 Enteric Fever
 Empyæma
 Endocarditis, Ulcerative
 Leucocythæmia
 Mollities Ossium
 Pneumonia, Lobular
 Pleurisy, Tubercular
 Pyæmia
 Phthisis, III.
 Rheumatism, Acute
 Remittent Fever
 Relapsing Fever
 Septicæmia
 Septic Pneumonia
 Trichinosis
 Tuberculosis

835. Inverse Remittent (High morning temperature)

Dentition
 Enteric Fever (x)
 Lobular Pneumonia
 *Tuberculosis

836. Intermittent Type

Afebrile intervals of varying duration

Ague

PYREXIA—continued

Malaria in General

Pernicious Intermittent

837. Termination by Crisis

(Sudden fall of temperature)

Erysipelas

Measles

*Pneumonia, Acute

Relapsing Fever

838. Termination by Lysis

(Gradual fall of temperature)

Enteric Fever

Lobular Pneumonia

Pleurisy

Psittacosis

Rheumatism, Acute

Weil's Disease

And most febrile diseases

839. Differential and Special

Enteric Fever

1st week gradual rise, daily remission 2°.

2nd week stationary, daily remission 1°.

3rd week stationary, daily remission 3° to 5°.

4th week gradual return to normal temperature.

Pelvic Cellulitis

under 102°

Pelvic Peritonitis

over 102°

Pneumonia, Acute

103° to 105°; morning remissions absent or slight

Scarlatina

high the first four days, then a partial subsidence. Not normal till end of second week

Typhus

1st week 104° to 106°, then one day's remission

2nd week, still higher

Tubercular Meningitis

about 100°, rarely over 102° until approach of death

Simple Meningitis

usually over 102°, irregular

840. Hectic Fever

(This usually implies septic poisoning)

Abscess, Tubercular

esp. in bones

Dysentery, Chronic

Empyæma

Enteric Fever (3rd week)

Hepatic Abscess

Phthisis (late)

Pyonephrosis

Pyelitis, Chronic

Peritonitis, Chronic (s)

Tabes mesenterica

Tubercular Ulceration of Intestines

Typhic state (see 143)

(See *Weakness*, 140)**836-840**

PART III

PALPATION

CONTRACTIONS : (s), sometimes ; (x), exceptionally ; i, first stage ;
ii, second stage ; iii, third stage ; *, most probable or characteristic disease.

PULSE

841. PULSE FREQUENT

(*Pulsus frequens*)

This is the case in all febrile diseases, except where there is pressure on the brain. (See *Pyrexia*)

Anæmia
Aconite-poisoning
Addison's Disease
Acute Ascending Paralysis
Angina Pectoris
Concussion of Brain or Cord
Coma Vigil
Collapse
Chorea
Collapse of Lungs
Displaced Heart
Excitement
Exertion
Exophthalmic Goitre

Epilepsy, ii.
Gout, Undeveloped
Hæmorrhage
Hernia, Strangulated
Irritation of Sympathetic
by tumours, etc.
Kussmaul's Disease
Leucocythæmia
Lesion of Medulla
Neurasthenia
Pregnancy
Pneumothorax
Pneumogastric Paralysis
pressure by tumours, etc.
Pneumonia, Acute
90 to 120, less than is usual with such a temperature. Pulse respiration ratio $\frac{5}{2}$
Shock
Sunstroke (syncopal)
Tachycardia
Typhus

PULSE FREQUENT—*cont.*

Typhic state

uncountable

Pulsus celer is not necessarily frequent (see 851)

842. PULSE SLOW (*Pulsus tardus*)

Arterio-sclerosis

Asthma, Spasmodic

Aortic Stenosis

Atonic Dyspepsia

Bradycardia

14 and upwards

Coma

Colic (s)

Compression of Cord

upper part

Convalescence from
Pneumonia

Cirrhosis of Lung

Diabetes

Ergotism

Fatty Degeneration of
Heart

Gallstones

Irritation of Pneumo-
gastric
tumours, etc.

Jaundice

Lead Colic

Lesion of Medulla (s)

Melancholia

Myocarditis

Meningitis (s)

Meningitis, Tubercular,
II.Paralysis of Sympathe-
tic

Relapsing Fever

Stokes-Adams Disease
(from 14)Syphilitic Heart Affec-
tion

Tumours of Brain

* * Beware of bigeminal
pulse (see 857), and
of action of convallaria,
digitalis, strophanthus,
conium, and aconite**843. Hard** (*Pulsus durus*)

Atheroma

or, if combined with hyper-
trophy of heart, bound-
ing

Aortic Stenosis

Apoplexy

*Cirrhosis of Kidney

Diphtheritic Laryngitis

Enteritis

Gout

Hypertrophy of Heart

Lead Colic

Pleurisy, Acute

Pericarditis, Acute

Peritonitis, Acute

(See *Tension*, 860)**844. Soft and Compres-
sible or Weak** (*Pul-
sus mollis*)

Anæmia

Atony of Stomach

Aortitis

SOFT PULSE—*continued*

Asthma, Spasmodic
 Asphyxia
 Aneurysm of Heart
 Cancer of Stomach
 Concussion of Brain
 Cholera
 Colic
 Coma Vigil
 Collapse
 Diphtheria
 Delirium Tremens
 Dysentery
 Dilatation of Heart
 Glanders
 Gout, Undeveloped
 Gallstones (severe
 attack)
 Hæmorrhage
 Hyperpyrexia
 Mitral Regurgitation
 Poisoning by Depres-
 sants
 Pulmonary Apoplexy
 Pyæmia
 Pyrexia (see 831)
 Perinephritis
 Pericarditis, II.
 Pneumonia, Lobular
 Rheumatism, Acute
 Syncope
 Sunstroke
 Shock
 Strangulated Hernia

Trance
 Typhus
 Typhic state

845. Weaker on one Side

Aneurysm of Ascending
 Aorta
 right side
 Aneurysm of Descend-
 ing Aorta
 left side
 Aneurysm of Innomi-
 nate Artery
 right side
 Aneurysm of Subcla-
 vian or Axillary
 same side
 Abnormal Distribution
 Embolism of Brachial
 Artery
 old or recent
 Mediastinal Tumour

846. Weak in Posterior Tibials

Abnormal Distribution
 Abdominal Aneurysm
 Obliteration of Aorta

847. Later in Left Radial

Aneurysm between In-
 nominate and Left
 Carotid

Late in both Pulses

Aortic Regurgitation

848. Full or Large (*Pulsus magnus*)

Aortic Regurgitation
 aortitic form

FULL PULSE—*continued*

Concussion of Brain, III.
 Erysipelas, I.
 Hypertrophy of Heart
 Hypertrophy with Dilation
 Pericarditis
 Rheumatism, Acute
 Spinal Meningitis

849. Small (*Pulsus parvus*)

Aortic Stenosis
 Angina Pectoris
 Ague (cold stage)
 Atrophy of Heart
 Asthma (paroxysm)
 Collapse (see 142)
 Collapse of Lungs
 Cholera
 Capillary Bronchitis
 Dysentery
 Dilatation of Heart
 Endocarditis
 Emphysæma
 Ergotism
 Enteric Fever (3rd week)
 Fibroid Heart
 Gangrene of Lungs
 Gallstones
 Gout, Undeveloped
 Hyperpyrexia (see 833)
 Intestinal Obstruction
 Mitral Stenosis

Myocarditis
 Noma
 Pneumonia, Acute late
 Pneumonia, Lobular
 Peritonitis, Acute
 Pleurisy, I.
 Pneumothorax
 Pericardium, Adherent
 Scarlatina
 Strangulated Hernia
 Typhus
 Typhic state

850. Wave Sustained

Aortic Obstruction
 if associated with left hypertrophy
 Contracted Kidney
 Hypertrophy of Heart
 Mitral Stenosis

(See *High Tension*, 860)

851. Jerky (*Pulsus celer*)

*Aortic Regurgitation
 water-hammer or Corrigan's pulse—more evident when the arm is raised
 Collapse
 Debility
 Enteritis
 Fatty Degeneration of Heart
 Hæmorrhage
 Pericarditis (s)

852. Arrhythmia

Pulse irregular, or intermittent, or both

Arterio-sclerosis of Left Coronary

usually every third beat dropped

Aortic Aneurysm

Apoplexy, Severe

Aneurysm of Heart

Arsenical-poisoning

Adherent Pericardium

Cardiac Breakdown

Collapse (see 142)

Concussion of Brain, III., or Spine

Dilatation of Heart

Displacement of Heart

Emphysæma

Fatty Degeneration of Heart

Fibrosis of Heart

Gout, Undeveloped

Gangrene of Lung

Hypochondriasis

Influenza

Jaundice

Lithæmia

Lesion of Medulla

Myocarditis, Acute

Mitral Regurgitation

Neurosis of Heart

Neurasthenia

Œdema Laryngis

Pericarditis

Syphilis

Tubercular Meningitis, III.

Also from overwork or abuse of tea or tobacco

853. Dicrotic

Alcoholism

Erysipelas

Enteric Fever

Hyperpyrexia

Pericarditis

Pleurisy, Acute, II.

Peritonitis, Septic

*Pyrexia (see 831)

Also on exposure to great heat

Anacrotic

Aortic Stenosis

854. Irritable

(Accelerated from slight causes)

Dysentery

Enteric Fever, 1st week

Hysteria

Masturbation

Neurasthenia

Spermatorrhœa

Also from nervousness or abuse of tea or tobacco

855. Thrilling

Anæmia

Aneurysm

Aortic Regurgitation with strong ventricle

Septicæmia

856. Atheroma and Tortuosity

Arterio-sclerosis

Aneurysm

Fatty Degeneration of Heart

Senility

857. Pulsus Bigeminus

Only every alternate beat felt

Epileptiform Attacks

Heart Failure

Mitral Stenosis

esp. after digitalis

Neurasthenia

Also after great mental or bodily strain

858. Pulsus Bisferiens

(Double beat)

Aortic Stenosis (s)

Aortic Regurgitation (s)

859. Pulsus Paradoxus

Smaller during inspiration

Acute Laryngitis

Pericardial Adhesions

ARTERIAL TENSION**860. High**

Powerful ventricular contraction with contracted arterioles

Arterio-sclerosis

Angina Pectoris

Bronchitis, Chronic

Cirrhosis of Kidney

Constipation

Cerebral Tumour, *i.*

Cheyne-Stokes Breathing (see 721)

Dilatation of Aorta

Emphysæma

Glycosuria

Gout

Hemicrania

Hypertrophy of Heart

Hysterical Seizure

Lead-poisoning

Malaria (cold stage)

Migraine

Meningitis, *i.*

Pregnancy

Pleurisy, Acute, *i.*

Rigor

And all kidney affections except the amyloid, the suppurative, and the tubercular

Further, too nitrogenous a diet

861. Low Tension

Heart weak and arterioles dilated; diastole well marked

Anæmia (s)

Chlorosis

Dilatation of Heart

Diabetes

Exhaustion

Fatty Degeneration of Heart

Hæmorrhage

ARTERIAL TENSION—*cont.*

Jaundice

Mitral Regurgitation

Obesity

Pleurisy, Acute, II.

Pyrexia (see 831)

It is also produced by a dry diet, by hot air, hot baths, or hot drinks, and by the action of chloral, cannabis indica, nitrite

High

Easy capillary circulation

Aortic Regurgitation

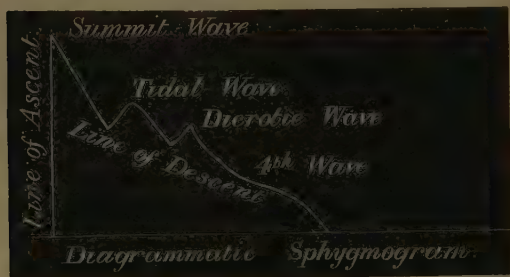
Pyrexia

Low

Obstructed peripheral circulation and contraction of muscular coat

Aneurysm

Mitral Regurgitation



of amyl, nitro-glycerine, and nitrous ether

862. Sphygmograph**LINE OF ASCENT****Vertical**

Vigorous heart-contractions

Aortic Regurgitation

Oblique

Weak heart-contractions

Aortic Stenosis

Aneurysm

proximal side

Mitral Regurgitation

SUMMIT OR PERCUSSION WAVE**Sharp**

Vigorous heart-contractions, easy capillary circulation, and relaxed muscular coat

Aortic Regurgitation

Blunt

Weak heart-contractions and contracted muscular coat

Aneurysm

proximal side

Aortic Stenosis

TIDAL WAVE

Marked

Vigorous heart-contractions and obstructed peripheral circulation

Arterio-sclerosis

Faint

Weak heart-contractions, or, if strong, associated with over-full arteries; easy capillary circulation and relaxed muscular coat

Aneurysm

proximal side

Aortic Regurgitation

Mitral Regurgitation

DICROTIC WAVE

Marked

Vigorous heart-contractions, easy capillary circulation, and relaxed muscular coat

Aneurysm of Descending Thoracic or Abdominal Aorta

Pyrexia

(See *Dicrotic Pulse*, 853)

Faint

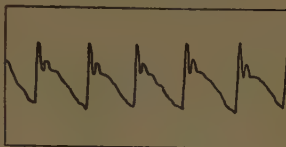
Weak heart; or strong heart with over-full arteries, obstructed peripheral circulation, and contraction of muscular coat

Aortic Regurgitation

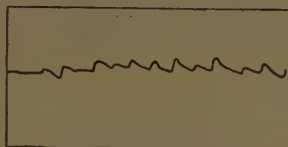
late

Arterio-sclerosis

SPHYGMOGRAMS



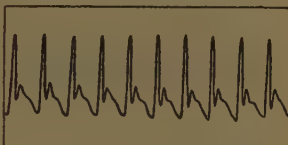
Normal Pulse.



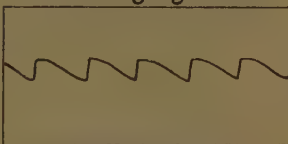
Mitral Stenosis.



Mitral Regurgitation.



Aortic Regurgitation.



Aortic Stenosis

The tracings will vary according to the degree of compensation

FAINT DICROTIC WAVE—
continued

Aneurysm
proximal side
Aortic Stenosis
Mitral Regurgitation

Line of Descent Irregular

Mitral Stenosis
Mitral Regurgitation

ABNORMAL PULSATION**863. Chest**

Aneurysm
Aneurysm of ascending
aorta first touches the
chest wall in the second
chest space near the
sternum; of transverse
arch, behind manu-
brium; of descending
arch, below first left rib;
of innominate artery,
behind right sterno-
clavicular articulation

No pulsation when solid

Dilated Aorta

supra-sternal notch

Cancer of Pleura**Empyæma (x)**

all one side

Empyæma necessitatis**Pleural Effusion**

very rarely

Tumour of Mediastinum
(s)

Pulsating Sarcoma
eggshell crackling

Bursting of an Artery
into an Abscess Cavity

Dilated Conus Arterio-
sus

second left space

Chlorosis and Mitral
Stenosis

third left space

(For Pulsating Veins
and Tracheal Tug,
see *Neck*, 390, 398)

863a. Abdomen

Aneurysm
Cancer
Embolism of Common
Iliacs
Palpitating Aorta
Tumours (x)

864. Pulsating Liver

Mitral Stenosis
Aortic Regurgitation
Tricuspid Regurgitation

865. Epigastric Pulsation

Anæmia
Aortic Regurgitation
Aneurysm
*Distension of Stomach
Dilatation of Right
Ventricle
Displacement of Heart
to Right
Dilatation of Stomach
Emphysæma

EPIGASTRIC PULSATION— *continued*

Hypertrophy of Right Ventricle

Hæmorrhage

Hepatic Abscess

Mitral Regurgitation

Mitral Stenosis

Pleural Effusion, Left

Palpitating Aorta or Celiac Axis

Pulmonary Stenosis

Pancreas, Enlarged

Spinal Irritation

Short Sternum

Tricuspid Regurgitation

Tumour resting on Aorta

866. Capillary Pulsation

Visible either in the nails or on a patch of erythema—produced by drawing a line across the forehead or sternum

Aortic Regurgitation

Heart-muscle Failure

CHEST

867. TACTILE OR VOCAL FREMITUS

Increased

That on the right side is normally more marked

Bronchiectasis

Cirrhosis of Lung

Congestion of Lungs

Phthisis, l.

Pneumonia, Acute

Pneumonia, Lobular (x)

when the patches have become confluent

Pulmonary Apoplexy

Syphilitic Lung

868. Diminished

Empyæma

Œdema of Lung

Pleural Effusion

Pneumothorax

Pleura, Thickened (s)

Also occlusion of main bronchus by aneurysm or intrathoracic tumour. Sometimes, too, when pneumonic or phthisical consolidation is extremely dense

869. Rhonchal Fremitus

Bronchitis

Bronchiectasis

Bronchus incompletely Plugged

870. Friction Fremitus

(Rare)

Acute Pleurisy

Pericarditis

871. THRILL

Systolic

Mitral Regurgitation

Aortic Stenosis

865-871

THRILL—continued

Aneurysm of Aorta
 Pulmonary Stenosis,
 Congenital

Diastolic

Aortic Regurgitation
 *Mitral Stenosis
 Tricuspid Stenosis (x)

872. Epigastric

(Rare)

Dilatation of Stomach

**HEART'S IMPULSE OR
'APEX'**

The impulse does not
 quite represent the posi-
 tion of the apex

873. Displaced Upwards

Atrophy of Heart
 Ascites
 Abdominal Tumours
 Contraction of a
 Vomica
 in left apex
 Distended Stomach
 Enlarged Spleen
 Enlarged Left Lobe of
 Liver
 Diaphragmatic Hernia
 Pericardial Effusion
 unless the heart is much
 hypertrophied
 Pleural Effusion, Ex-
 tensive Right
 Pregnancy
 Tympanites

**874. Displaced Down-
wards**

Aneurysm of Heart
 Aortic Regurgitation
 Aortic Stenosis
 Cirrhosis of Kidney
 Chlorosis
 Cardiopptosis
 Emphysæma
 *Hypertrophy of Heart
 (see 880)
 Nephritis, Chronic
 Pneumothorax
 Tumours at Base of
 Heart

875. Displaced to Right

Atrophy of Heart
 Contraction of Right
 Lung
 Collapse of Right Lung
 Cirrhosis of Right Lung
 Diaphragmatic Hernia
 Emphysæma
 Mediastinal Tumour
 of left side by pressure; of
 right side by occlusion
 of that bronchus
 Pleural Effusion, Left
 Pneumothorax, Left
 Phthisis (x)
 contraction of vomica in
 right lung
 Pneumonic Consolida-
 tion, Left
 only when very extensive
 Transposition of Viscera

HEART'S IMPULSE—*cont.***876. Displaced to Left**

- Aneurysm
- Aneurysm of Heart
- Ascites
- Aortic Regurgitation
- Aortic Stenosis
 - slightly
- Abdominal Tumours
- *Cirrhosis of Kidney
- Chlorosis
- Cirrhosis of Left Lung
- Contraction of Left Lung
- Collapse of Left Lung
- Exophthalmic Goitre, Old
- Hypertrophy of Heart, L.V. (see 880)
- Liver, Enlarged
- Mitral Regurgitation
- Phthisis (x)
 - contraction of vomica in left lung
- Pleurisy, Old Left
 - contraction of lung
- Pleural Effusion (Right)
- Pneumothorax, Right
- Tympanites
- Tumour of Right Lung
- Tumour of Right Side of Mediastinum
- Tumour of Left Side of Mediastinum
 - if left bronchus is occlude

877. Diffused Impulse

- Aortic Regurgitation
- Aneurysm of Desc. Aorta
- Adherent Pericardium
- Dilatation of Heart
- Fatty Degeneration of Heart
- Hypertrophy, Excentric Left
- Hypertrophy, Right
- Mitral Stenosis (late)
- Pericardial Effusion undulating
- Shrinking of Præcordial Lung
- Tumour in Posterior Mediastinum

878. Force Increased

- Apoplexy
- Aortic Stenosis
- Atrophy of Lungs
- Aneurysm of Desc. Aorta
 - 'double jog'
- Acute Endocarditis
- Cirrhosis of Kidney
- *Left Hypertrophy (see 880)
 - heaving
- Myocarditis, Acute
- Mitral Regurgitation
- Mediastinal Tumour
- Pyrexia (see 831)
- Palpitation
 - 'knocking,' not 'heaving'

HEART'S IMPULSE—*cont.***879. Force Diminished or Absent**

Atrophy of Heart
 Aneurysm of Heart
 Contraction of Right Lung
 Cardiac Depressants
 Dilatation of Heart
 Emphysæma
 Fatty Degeneration of Heart
 Myocarditis, Acute (late)
 Obesity
 Pericardial Effusion
 Pericardial Adhesions
 Præcordial Overlapping of Lungs, Increased
 Prostration (see 141)
 Thick Parietes

* * The impulse is sometimes impalpable in health

880. Hypertrophy of Heart**(a) Left Ventricle**

Aneurysm
 Atheroma
 Athletics
 Aortic Regurgitation
 s. cor bovinum
 Aortic Stenosis
 slight
 Cirrhosis of Kidney
 Cyanotic Kidney

Chlorosis

Exophthalmic Goitre
 Mediastinal Tumours
 Pericardium, Adherent
 Pregnancy
 Palpitation, Long continued

(b) Right Ventricle

Asthma
 Emphysæma
 Mediastinal Tumour
 Phthisis, Chronic

ABDOMEN

PALPATION

881. Swellings and Tumours Movable with Respiration

Enlarged Liver (see 882)
 Enlarged Gall-bladder (see 886)
 Hydatids of Liver
 Growths connected with Liver
 Enlarged Spleen (see 887)
 Growths connected with Spleen

882. LIVER ENLARGED**883. Smooth**

Acromegaly
 Amyloid
 Cirrhosis, Hypertrophic, *i.*

LIVER ENLARGED—*cont.*

Cyanotic

u. from mitral disease

Fatty Degeneration

Glandular Fever

Hepatic Abscess

Hypertrophy

Hepatitis, Acute

Hydatids (see 920)

Infiltrated Cancer

Lymphadenoma (s)

Obstructed Bile-ducts

Phosphorus-poisoning

Relapsing Fever

Remittent Fever

Weil's Disease

884. Nodular

Cancer of Liver

shape altered

Cirrhosis, Hypertrophic,
II.

Syphilitic Disease of
Liver

885. Liver Depressed

Emphysæma

Hepatoptosis

Meso-hepar (x)

Pleural Effusion, Right

Pneumothorax, Right

Tumour

LIVER DIMINISHED

(See *Percussion*, 918)

886. Gall-bladder Enlarged

It is sometimes enormous

Carcinoma

Dropsy of Gall-bladder

Gallstones

Obstructed Bile-duct

* * Beware of mistaking cancer
of the head of the pancreas (see *Gaseous Test*,
928)

887. Spleen Enlarged

Amyloid Disease

Acute Yellow Atrophy

Ague

Acute Ascending Paralysis

Acromegaly

Cirrhosis of Liver

Cancer (x)

Diphtheria

Embolism

Enteric Fever

Erysipelas

Glandular Fever

Hydatids

Hepatic Colic

Lymphadenoma

Leucocythæmia

sometimes nodular

Portal Obstruction

Pernicious Anæmia

Pyæmia

Psittacosis

Polymyositis

SPLEEN ENLARGED—*cont.*

Puerperal Septicæmia
 Pancreatitis, Chronic
 Relapsing Fever
 Remittent Fever
 Rickets (s)
 Septic Endocarditis
 Syphilitic Liver
 Syphilis, Hereditary
 Syphilis, Secondary
 during exanthem
 Septicæmia
 Typhus (prodr.)
 Tuberculosis, Acute
 Weil's Disease

888. Spleen Displaced (x)

Ascites
 Enteroptosis
 Meteorism
 Meso-Spleen
 Pleural Effusion, Left

889. Extra Floating Ribs
(10th, and even 9th)

Enteroptosis

**ABDOMINAL TUMOURS
AND SWELLINGS**

When large, pelvic tumours
 become abdominal, and
 abdominal tumours central

890. Central

Aneurysm
 Cirrhosis of Stomach

Cancer	{	Stomach
or		Pancreas
Colloid		Omentum
of		Intestine

Enchondroma
 Fatty Tumour of Omentum
 Hypertrophy of Pylorus
 Intussusception
 sausage-shape
 Lumbar Abscess (s)
 Lumbar Glands, Enlarged
 Mesenteric Glands, Enlarged
 Mesenteric Cysts
 Peritonæum, Thickened
 Post-peritonæal
 Abscess
 Pancreatitis
 Pancreatic Cyst
 Tabes mesenterica

* * Beware of contraction of
 the rectus muscle

891. Traced into Pelvis

Congestion of Uterus,
 Chronic
 Cyst of Broad Ligament
 Distended Bladder
 in women, sometimes
 enormous
 Ectopic Foetation
 Fibroid Tumour of
 Uterus

PELVIC TUMOURS—cont.

Fibrocystic Tumour of
 Uterus
 Hydrometra
 Hydrosalpinx
 Hypertrophied Bladder
 Hæmatosalpinx
 Myoma
 Menses, Retained
 Ovarian Cyst or
 Tumour
 Pregnancy
 Pyosalpinx
 Polypus
 Pericystic Abscess
 Peritonæal Hydatids
 Subinvolution
 Tubal Cancer or
 Tubercle

892. Wandering

Concretions in Intestine
 Cancer of Pylorus (x)
 Fatty Tumour of Intes-
 tine
 appendix epiploica
 Floating Kidney
 Floating Spleen
 Floating Lobe of Liver
 towards right ileum
 Impacted Fæces
 Phantom Tumour
 Tumour etc. of Trans-
 verse Colon
 when its mesentery is long

893. Lateral

Appendicitis
 Cystic Kidney (large)
 Dysentery
 doughy colon
 Encephaloid Kidney
 Fæcal Accumulation
 Gall-bladder, Distended
 Hydronephrosis
 variable
 Hydatids of Liver or
 Kidney
 Hæmatocele, Pelvic
 Hydrosalpinx
 Hæmatosalpinx
 Ovarian Cyst, etc.
 Pelvic Abscess
 Perinephritic Abscess
 Pyonephrosis
 Pyosalpinx
 Parasite of Kidney
 Spleen, Enlarged
 (notched)
 Sarcoma of Kidney
 Doubtful cases should be
 examined after an ene-
 ma under an anæsthetic.
 For tumours connected
 possibly with the kidney
 or pancreas, gaseous
 distension should be
 employed (see 928)

894. Fluctuating

Ascites
 Abscess in Abdominal
 Parietes

891-894

FLUCTUATING TUMOURS— *continued*

Distended Bladder
slightly
Ectopic Gestation
Effusion into Lesser
Peritonæal Cavity
Hydatids
vibratile
Hydronephrosis
Hydrosalpinx
Lumbar Abscess (x)
Ovarian Cyst (s)
Pregnancy
Pyonephrosis
Pyosalpinx

895. Impulse on Coughing (groin)

Hernia
Psoas Abscess
Varix
Also some cysts

896. Enlarged Mesenteric or Lumbar Glands

Amyloid Disease
Cancer of Intestine
Cancer of Kidney
Cancer of Testis
Dysentery
Enteric Fever
Glandular Fever
Peritonitis
Tubercle
Tabes mesenterica

UTERINE

EXAMINATION

897. Cervix Altered

Cancer
hard; os enlarged and
irregular, with everted
lips

Cancer of Body
os sometimes dilated
Retroflexion and -ver-
sion
low, with os looking for-
wards

Anteversio
os looks to hollow of
sacrum

Anteflexion
high; os looks downwards
and forwards

Chronic Metritis
hard

Acute Metritis
swollen and hot

Acute Endometritis
hot, swollen, and puffy; os
dilated and velvety

Chronic Endometritis
normal or catarrhal

Cervical Catarrh
puffy, large, and velvety
in nulliparæ; nodular in
multiparæ

Atrophy of Uterus
small

Ovarian Disease
displaced to opposite side

Subinvolution
soft

898. Fulness of Douglas's Pouch

Ascites
Ectopic Gestation
rupture
Hydatids
Hæmatocele, Pelvic
Ovarian Cyst, Small
Retroflexion
Retroversion

899. TUMOURS OR PSEUDO-TUMOURS

Central

Anteflexion
hard mass in anterior fornix
Fibroid, External
Peritonitis
thickening of fornices
Sarcoma
friable; springs from body of uterus

Lateral

Abscess, Pelvic
Cellulitis, Pelvic
Cancer of Ovary
u. secondary
Ectopic Gestation
Fibroma of Ovary
Fibrocystic Ovary
Hydrosalpinx
Hæmatosalpinx
Hæmatoma, Pelvic
Oöphoritis
Ovarian Cyst

Parovarian Cyst
Pyosalpinx
Sarcoma

900. Uterus Painful on Movement

Cancer of Body of Uterus
Endometritis, Acute
Metritis, Acute
Peritonitis, Pelvic
Salpingitis

901. Uterus Enlarged

The sound must not be used until pregnancy has been excluded

Cancer of Body
Endometritis
esp. septic
Elongated Cervix
Fibroid
internal or interstitial
Hypertrophy
Metritis, Chronic
Pregnancy
Polypus
Subinvolution

902. Sound Measurement Diminished

Normally $2\frac{1}{2}$ "
Arrested Development
Adhesions
Hyperinvolution
Inversion, Partial
Senile Atrophy
Tumour of Fundus
apparent

PART IV

PERCUSSION

CONTRACTIONS: s, sometimes; x, exceptionally; i, first stage; ii, second stage; iii, third stage; *, most probable or characteristic disease.

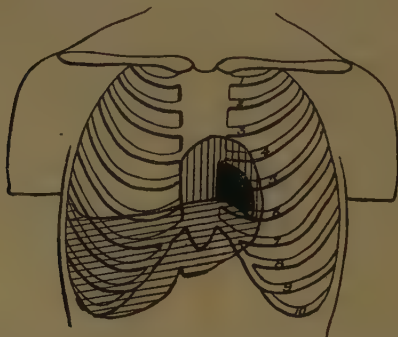


DIAGRAM SHOWING SUPERFICIAL CARDIAC DULNESS (BLACK), DEEP CARDIAC DULNESS (VERTICAL LINES), AND LIVER DULNESS (HORIZONTAL LINES)

CARDIAC DULNESS

INCREASED

903. Vertically

(real or apparent)
Ascites (upwards)
Aortic Regurgitation

Contraction of Left Lung

or of a vomica within

Cancer of Pleura

Cancer of Pericardium

Consolidation of Lung
above Heart

INCREASED VERTICALLY—
continued

Endocarditis, Acute
 Encysted Empyæma or
 Pleurisy, near Heart
 Fatty Degeneration of
 Heart
 Hypertrophy of Left
 Ventricle
 esp. if excentric
 Hypertrophy of Right
 Ventricle
 Myocarditis, Acute
 Pericardial Effusion
 Syphilitic Heart

904. Transversely

Aortic Regurgitation
 (to left)
 Dilatation of Right
 Ventricle
 Dilatation of Right
 Auricle
 dulness in 3rd right space
 Endocarditis
 Hypertrophy of Left
 Ventricle
 Mitral Regurgitation
 Mitral Stenosis, Late
 Pericardial Effusion
 pyramidal ; base-line
 reaching sometimes to
 right nipple-line
 Pleural Effusion
 if right, to left ; if left, to
 right
 Retraction of Left Lung

Equably

Endocarditis
 High Diaphragm
 Myocarditis
 Universal Hypertrophy

Irregularly

Aneurysm of Aorta
 Mediastinal Tumour
 Patent Foramen Ovale

905. DIMINISHED

Atrophy of Heart
 slightly
 Cirrhosis or Contraction
 of Right Lung
 Emphysema
 Pneumopericardium
 Pneumohydroperi-
 cardium
 Pneumothorax, Left

**906. Undiminished by In-
 spiration**

Adhesion of Peri-
 cardium to Pleura

CHEST AND BACK

907. ABNORMAL DULNESS

Aneurysm of Aorta
 Aneurysm of Descend-
 ing Aorta
 left interscapular and
 supraspinous regions

903-907

ABNORMAL DULNESS—

continued

Bronchiectasis

if surrounded by condensed
lung-tissueBronchial Glands, En-
larged

interscapular

Cancer of Lung, Exten-
sive

Cancer of Pleura

Congestion of Lungs,
Hypostatic
bases

Collapse of Lungs

a strip each side of spine

Cirrhosis of Lung

all one side; wooden;
high-pitched

Enteroptosis

loss of tympanitic note in
Traube's space

Empyæma

Encysted Empyæma

Gangrene of Lung

before softening

Hydatids of Lung,
Superficial

Hydatids of Liver

convexity upwards

Hydropneumothorax

shifting with position

Hæmatothorax

Hydrothorax

Lobular Pneumonia (x)

only when several areas
have coalescedMediastinal Abscess or
Tumour

over prominence

Œdema of Lungs

both bases; but unequally

Pneumonia, Acute

u. right base

Pneumonia Serpens

healing in one direction
while advancing in
another

Phthisis, I.

supra-scapular, supra-cla-
vicular, infra-clavicular

Pleurisy with Effusion

begins from below; upper
limit of dulness ob-
liquely upwards and
backwardsPleura, Thickened
wooden

Pulmonary Apoplexy

circumscribed incomplete
dulness usually in mam-
mary or axillary regionSyphilitic Disease of
Lungs
patchesTransposition of Viscera
in Traube's semilunar
spaceTuberculosis, Acute (x)
(see 904)**908. Cracked-Pot Sound**
(Bruit de pot fêlé)Usually due to a superficial
empty cavity, that com-
municates freely with a
bronchial tube. It is
normal in a crying infant**907-908**

CRACKED-POT SOUND—
continued

Bronchiectasis

Gangrene of Lung

*Phthisis, II.

Pyopneumothorax
with wide fistulaPneumonia, Acute (x)
due to an islet of relaxed
lung-tissue surrounded
by hepatisation**909. Sense of Resistance**
(Diminished Lung
Elasticity)

Cancer of Pleura

Cirrhosis of Lung

Distension of Lung,
Extreme

Pleura Thickened

Pleural Effusion

Pneumonia, Acute

Pneumothorax,
Extreme**910. Hyper-resonance or
Abnormal Resonance**Atrophy or Shrinking
of Liver (see 918)

Asthma, Spasmodic

Bronchiectasis

consolidation between the
dilatation and the sur-
face

†Cavity, Large Relaxed

**Cirrhosis of Opposite
Lung**extending a little beyond
opposite border of ster-
num†Dilatation of Stomach
left axilla

Emphysæma

Gangrene of Lung
after softeningKidney, Floating
one lumbar regionKidney, Congenital Ab-
sence of one
one lumbar regionMediastinal Tumour
of opposite side†Margin of Lung Border-
ing on Sudden Con-
solidationPneumothorax
all one sidePerforation of Bowel
disappearance of liver
dulness†Relaxed Lung above
Pleural Effusion
infra-clavicular**911. Skodaic, Tympanitic,
or Tubular Resonance**Those marked † in
above listIn Traube's semilunar
space, which corresponds
on the left to the posi-
tion occupied by the liver
on the right, the note is
normally tympanitic**908-911**

912. Amphoric Resonance

Large superficial
empty cavity

Cirrhosis of Lung

Pneumothorax

Subphrenic Abscess

913. Coin Sound

Large cavity with
smooth walls

*Pneumothorax

Subphrenic Abscess

914. Thrill on Percussion

Hydatids (wavy)

Hydropneumothorax

Pyopneumothorax

915. APEX OF LUNG**High**

Emphysemæ

Low

Collapse of Lung

Cirrhosis of Lung

Phthisis

an early symptom

916. DIAPHRAGM**High**

Ascites

Contraction of Lung

Dilatation of Stomach

Paralysis of Diaphragm
Tympanites

Low

Hypertrophy of Heart
with dilatation

Hypertrophy of Heart,
Universal

Hypertrophous Emphy-
semæ

Mediastinal Tumours

Pericardial Effusion

Pleural Effusion

Spasm of Diaphragm

917. VARIATIONS IN PERCUSSION NOTE**Wintrich's Sign**

Pitch higher on opening
mouth

Cavities

Pneumothorax

Gerhardt's Sign

Note altered by change of
posture

Cavity, Half-filled

Biermer's Sign

Note deeper when patient
sits up

Hydropneumothorax

Friedreich's Sign

note higher on deep inspi-
ration

Cavities (s)

ABDOMEN

LIVER DULNESS

918. Diminished

Acute Yellow Atrophy
or absent

Emphysæma

Cirrhosis of Liver,
Atrophic

Cirrhosis or Contraction
of Left Lung

Pneumo-peritonæum
(absent)

from perforation of bowel,
etc.

Tympanites (q.v.)

919. Altered

Tumours of Liver
(see 884)

Constricted Right Lobe
tight-lacing

920. Increased

Ascites (s)

Amyloid

Abscess of Liver

Cirrhosis, Hypertrophic

Cancer of Liver

Cancer of Omentum

Cancer of Pancreas

Cancer of Stomach

Cancer of Right Kidney

Cyanotic Liver

Fæcal Accumulation

Fatty Degeneration of
Liver

Hydatids (Vibratory)

Hypertrophy, Simple

Mediastinal Tumours

Obstructed Bile-ducts

Pleural Effusion, Right

Pericardial Effusion,
Extensive

921. LIVER RAISED

Cirrhosis, Contraction,
or Collapse of Right
Lung

Paralysis of Diaphragm
with inspiration

Tympanites

922. LIVER DEPRESSED

Asthma, Spasmodic

Cirrhosis of Left Lung

Emphysæma

Hepatoptosis

Hydropericardium

Intrathoracic Tumours

Meso-hepar (rare)

Pleural Effusion, Right

Paralysis of Diaphragm
with expiration

Spasm of Diaphragm

Tight-lacing

923. SPLEEN ENLARGED

(See *Palpation*, 887)

* * Percussion of the spleen
is of use only with the
body erect

924. Tympanites and Meteorism

Dysentery

Enteric Fever

Hysteria

Intestinal Obstruction,
Acute

Intestinal Catarrh (s)

Ileus

Puerperal Septicæmia

Peritonitis, Acute

Pneumo-peritonæum
from perforation—appen-
dicitis, or dysenteric,
syphilitic, typhoid, or
tubercular ulcerSpinal Cord, Chronic
Disease of

Tabes mesenterica

Typhic state (see 143)

925. Partial Abdominal Dulness

Ascites

lowest part

Abdominal Aneurysm

Colloid Omentum

Cancer of Kidney

Cancer of Pancreas

Cysts

Distended Bladder

Fæcal Accumulation

Intestinal Obstruction,
Seat of

Enlarged Liver

(see *Palpation*, 882)

Enlarged Spleen

(see *Palpation*, 887)

Tumours (see 890)

* * The note over intestinal
cancer is usually resonant**926. Ascites**When the patient sits up,
the upper limit of dul-
ness is concave

Anasarca (see 191)

Aneurysm (s)

Cirrhosis of Liver,
AtrophicCirrhosis of Liver,
Hypertrophic (x)

Cyanotic Liver

Cancer of Liver

Cancer of Peritonæum

Mitral Disease

Perihepatitis

Pancreatitis (s)

Portal Obstruction

Tumours (s)

927. Fluid TestThe stomach, when par-
tially filled with liquid,
yields to percussion a
dull area one inch above
the umbilicusIn Dilatation of the
Stomach, this dull area
is at or below the um-
bilicus**928. GASEOUS TEST****Stomach**Artificial distension of the
stomach is produced by**924-928**

GASEOUS TEST—*cont.*

the patient taking successively a teaspoonful of bicarbonate of soda and the same quantity of tartaric acid upon an empty stomach

**Resonance over previously
Dull Area**

Pancreatic Enlargement

Colon

The acid and alkali are introduced into the previously emptied rectum

**Resonance over previously
Dull Area**

Renal Tumours or
Cysts

PART V

AUSCULTATION

CONTRACTIONS: (s), sometimes; (x), exceptionally; I, first stage; II, second stage; III, third stage; *, most probable or characteristic disease.

LUNGS

929. Puerile Breathing

As in infants

Cirrhosis of Opposite Lung

Compression of Opposite Lung

Collapse of Opposite Lung

Pleural Effusion
in infra-clavicular region

930. Wavy or Saccadée Breathing

'Of little value' (Dr. Gee)

Bronchial Catarrh

Hypertrophy of Heart

Nervousness

Patchy Pleuritic Adhesions

Phthisis, I.

931. Weak or Absent Breathing Sounds

(Occluded bronchus,
blocked alveoli, fluid,
etc.)

Asthma, Spasmodic

Aneurysm

Bronchitis, Plastic

Cancer of Lung

Cirrhosis of Lung

in parts

Congestion of Lungs (s)

Collapse of Lung

Diaphragmatic Pleurisy
base

Diaphragmatic Hernia

Emphysemæ

Encysted Pleurisy or
Pneumothorax

Foreign Body in Bronchus

WEAK BREATHING SOUNDS*—continued*

Gangrene of Lung (s)
 Hydropneumothorax
 Hydatids of Lung
 Hooping-Cough
 Mediastinal Tumour
 Œdema of Lungs
 Occluded Bronchus
 Pleural Effusion
 Pleura, Adherent or Thickened
 Pneumothorax
 Pyopneumothorax

To be of value this symptom must co-exist with normal breathing elsewhere

932. Prolonged Expiration

Asthma, Spasmodic
 Bronchitis, Plastic
 Bronchiectasis
 Consolidation, Commencing
 Emphysemæ
 Hay Asthma
 Hydatids of Lung
 Laryngitis, Acute
 Obstructed Bronchus
 Phthisis

933. Bronchial Breathing

This is normal at upper part of sternum, between spines of scapulæ, and sometimes under right clavicle

Actinomycosis
 Aneurysm
 Bronchial Glands, Enlarged
 Cancer of Lung
 Bronchiectasis
 Collapse of Lung
 Cirrhosis of Lung
 Empyemæ (s)
 Gangrene of Lung
 Mediastinal Tumour
 Œdema of Lungs
 Pulmonary Apoplexy
 *Pneumonia, Acute, II.
 Pneumonia, Lobular, Extensive
 Phthisis, II.
 Pleural Effusion in Children
 and, if in thin layer, in adults
 Syphilitic Lung
 Vomica communicating with a Bronchus

934. Cavernous Breathing

Usually due to a small, empty, patent cavity

Abscess of Lung
 Bronchiectasis
 Cancer of Lung (broken down)
 Cirrhosis of Lung
 Gangrene of Lung
 Phthisis, III.
 Pleurisy (x)

CAVERNOUS BREATHING—
continued

Pneumothorax, Locu-
lated

Syphilitic Lung (late)

935. Amphoric Breathing

Usually due to a smooth-
walled superficial cavity
of at least moderate size

Bronchiectasis

Gangrene of Lung (late)

Phthisis, III.

Pneumothorax, or

Pyopneumothorax
communicating with a
bronchus

**936. Cog-wheel Inspira-
tion at Apex**

Said to be an early sign of
Phthisis

937. Bell Sound

Diaphragmatic Hernia

Distended Colon (x)

*Pneumothorax

**938. India-rubber Ball
Sound**

Heard during respiratory
pause

Cavity

939. Gurgling

Abscess of Lung

Bronchiectasis

Caseous Softening

Collapse of Lung

around a large bronchus

Cavity (largish)

Gangrene of Lung (late)

Hydatids of Lung
after rupture

Phthisis, III.

**940. Rhonchus or Sonor-
ous Râle**

Asthma, Spasmodic

Ague (warm stage)

*Bronchitis, Acute or
Chronic

first dry, afterwards moist

Bronchitis, Plastic

Bronchial Catarrh

Bronchorrhœa

Bronchus, Partially
Obstructed

Collapse of Lung

Enteric Fever

Emphysæma (u)

Hay Asthma

Hooping-Cough

Iodism

Influenza

Measles

Mediastinal Tumour

Mitral Disease

Psittacosis

Pernicious Intermittent

Phthisis, II.

conducted

Remittent Fever

Relapsing Fever (s)

Rickets

Tympanites

Tuberculosis, Acute

Variola

941. Sibilus or Sibilant Râle

Usually associated with rhonchus

Asthma, Spasmodic

Aneurysm or Tumour pressing on bronchus

*Bronchitis, Acute or Chronic

Bronchial Catarrh

Bronchitis, Capillary

Bronchitis, Plastic

Enteric Fever

Hypertrophy of Heart

Influenza

Lobular Pneumonia

Measles

Variola

942. Dry Crackle

Emphysæma, Vesicular

Emphysæma, Interlobular

Tuberculosis (softening)

943. Metallic Tinkling

Diaphragmatic Hernia

Phthisis, III.

Pneumothorax, Patent

944. Succussion Sound

Abscess of Lung

Diaphragmatic Hernia

Gangrene of Lung

Hydropneumothorax

Hydropneumopericardium

Phthisis, III.

Pyopneumothorax

In Abdomen

Dilatation of Stomach

Distended Colon (x)

Pneumoperitonæum

945. VOCAL RESONANCE**Increased**

(As in *Bronchophony*, 947)

Diminished or Absent

Emphysæma

Bronchus, Obstructed

Emphyæma

Edema of Pleura

Pleural Effusion

Pneumothorax

946. Ægophony (rare)

Pleural Effusion

either in thin layer or at upper limit of thicker layer. Heard specially under scapula

947. Bronchophony

Normal over upper dorsal spinous processes and under right clavicle near sternum—especially in women

Bronchiectasis

Collapse of Lung

Cirrhosis of Lung

Cancer of Lung

BRONCHOPHONY—cont.

Emphysæma, Marked

Pneumonia, Acute

s. 'sniffing'

Phthisis, II.

Pleural Effusion

if in thin layer

Pulmonary Apoplexy

Syphilitic Lung

Tuberculosis

948. Pectoriloquy

(Natural over the trachea)

Bronchiectasis

Cirrhosis of Lung

Cavity in Lung

smooth-walled and communicating with bronchus

Hydatids of Lung

after rupture

Pneumonia, Acute, II.

(s)

Phthisis, III.

Solidification between a Bronchus and the Surface

948a. Echophony

A short sound which follows the vocal resonance like an echo

Woillez's Disease

949. Friction Sound

Bronchial Glands, Enlarged

between scapulæ

Cancer of Pleura

Embolism of Lung

Fracture of Rib

Interlobular Emphysæma

*Pleurisy, I. and III.

Pneumonia, Deep-seated

Phthisis (apex)

Pleura, Thickened

Adherent

creaking

Recent Adhesion

spongy

Perihepatitis

audible all over right side

Pyæmic Abscess

Tubercles on Pleura

* * Beware of shoulder-blade and shoulder-joint friction

950. Crepitation or Crepitant Râle

Cirrhosis of Lung

largish—metallic

Congestion of Lungs, Hypostatic

Cerebro-spinal Meningitis

Capillary Bronchitis

subcrepitant râles with inspiration and expiration

Collapse of Lung

fine

Empyæma (s)

Gangrene of Lung, I.

Hooping-Cough, I.

CREPITATION—*continued*

Imperfect Expansion of
Air-cells in bedridden
patients

removed by a few deep
inspirations

Œdema of Lungs

Œdema of Pleura
fine

Phthisis, I. and II.

apex ; heard with inspira-
tion and expiration

Phthisis, III.

coarse and clicking

Pneumonia, Acute

I, fine, dry inspiratory ;

III, subcrepitant râle

Pneumonia, Lobular

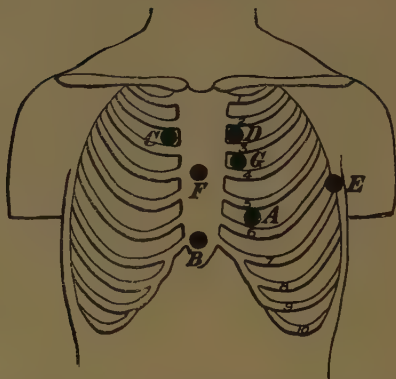
metallic, in patches, heard
with inspiration and ex-
piration

Tuberculosis, Acute

fine

Woillez's Disease

HEART



POINTS OF MAXIMUM INTENSITY FOR MURMURS

Mitral Stenosis, *A*. Mitral Regurgitation, *A*, *E*, and back.
 Tricuspid Stenosis, *B*. Tricuspid Regurgitation, *C*, *B*.
 Aortic Stenosis, *F*, *C*, and back. Aortic Regurgitation, *C*, *B*.
 Pulmonary Stenosis, *D*, *G*. Patent Duct, *D*. Hæmic or
 Functional Murmurs, *D*. Acute Endocarditis, *A*

951. APEX MURMURS

Præsystolic

Mitral Stenosis

u. soft; brought out by
 exercise, or, if heart
 turbulent, by digitalis

Tricuspid Stenosis

loudest at base of ensi-
 form cartilage, or at the
 insertion of the 5th right
 rib; not heard at back

Systolic

Acute Endocarditis
 blowing

Mitral Regurgitation

loud and blowing; heard
 in left axilla and left
 vertebral groove

Tricuspid Regurgitation
 base of ensiform carti-
 lage

952. BASE MURMURS**Systolic Functional**

Low-pitched; heard best at
2nd left space

Anæmia (225)

Addison's Disease

Chlorosis

Exophthalmic Goitre

Hæmorrhage

Systolic Organic

Aortitis

harsh

Aortic Stenosis

loud; heard at mid-ster-
num, 2nd right space,
and left vertebral groove

Aneurysm, Intrapari-
cardial

booming

Dissecting Aneurysm

heard at left vertebral
groove

Mediastinal Tumour

pressing on aorta

Malformation of Heart

sharp

Pulmonary Stenosis

2nd and 3rd left spaces

Perforation of Septum
Ventriculorum

Roughness and Rigidity
of Aortic Valves

Roughness of Conus
arteriosus

Diastolic

Aortic Regurgitation

blowing; heard best at
2nd right space and at
junction of 3rd left
cartilage with sternum.
Conducted to ensiform
cartilage, but not to
back

Patent Ductus arterio-
sus

2nd left space

Acute Endocarditis (x)

on infective endocarditis
setting in, the old mur-
mur changes its cha-
racter

Dilatation of Aorta
above Valve

* * It must not be forgotten
that stenosis and insuffi-
ciency may co-exist

**953. ALTERED FIRST
SOUND****Weak**

Ague (cold stage)

Collapse (142)

Cholera

Gouty Heart

Obesity

Pericardial Effusion

Pernicious Intermittent

Prostration

Trance

Typhus

Typhic state (143)

952-953

ALTERED FIRST SOUND— *continued*

Muffled

Atrophy of Heart
Asthma, Spasmodic
Endocarditis, Acute
Fatty Degeneration
Interposed Emphyse-
matous Lung
Nephritis, Chronic

Unclassified

Aortic Regurgitation
murmurish at base
Aortic Aneurysm
often absent
Dilatation
short and loud
Functional Heart Dis-
order
ringing
Hypertrophy of Left
Ventricle
indistinct or reduplicated
Hypertrophy of Right
Ventricle
distinct
Mitral Stenosis
loud, short, and sharp
Myocarditis, Acute
sharp at first, afterwards
dull

954. SHORTENED INTERVAL AFTER SYSTOLE

Incomplete ventricular
contraction

Dilatation of Heart
unless arterioles are resist-
ent

Impending Heart Fail-
ure

955. ALTERED SECOND SOUND

Anæmia
sharp
Aortitis
accented
Aneurysm
drum-like
Aortic Stenosis
indistinct
Aortic Regurgitation
valvular form, feeble; aor-
titic form, accentuated
Arterio-sclerosis
audible at angle of right
scapula
Fatty Degeneration
sharp
Hypertrophy
left, loud; right, very loud
Myocarditis, Acute
sharp at first, afterwards
dull
Mitral Stenosis
accentuated pulmonary
Mitral Regurgitation
accentuated pulmonary
Pericardium, Adherent
inaudible at apex
Rough and Rigid Aortic
Valves
loud

956. Reduplication

Hypertrophy, Left
of first sound at apex

Hypertrophy, Right
of second sound

Mitral Stenosis
of second sound at base

Nephritis, Chronic

Pyrexia (see 831)

It is present occasionally
in healthy persons

957. Galloping or Triple Rhythm

(Bruit de galop)

Anæmia

Impending Failure of
Heart's Action

Myocarditis

Nephritis, Chronic

958. Irregular Action

Ascites

Aneurysm (esp. intra-
pericardial)
tumultuous

Chorea

Distension of Stomach

Functional Heart Dis-
order

Gout, Undeveloped

Influenza

Mitral Regurgitation

Neurasthenia

Neuritis, Multiple

Spermatorrhœa

Also from abuse of tea or
tobacco

959. Cliquetis Metallique

Rare

Hypertrophy of Heart
systolic

960. Aneurysmal Bruit

Aneurysm of Aorta

with systolic murmur

Aneurysm of Abdominal
Aorta

with post-systolic murmur

Aneurysm in General
unless filled with clot

Pulsating Sarcoma

961. Loud Splashing

Hydropneumopericar-
dium

audible at a distance

962. Friction Sound

(Increased or brought out
by pressure of stetho-
scope. The intensity
point may change with
position of body; it is
usually loudest at base)

Pericarditis

Pleurisy of Overlapping
Lung

rarely audible when not
breathing

Tubercles of Perito-
næum (s)

**963. Crepitation Synchron-
ous with Heart's
Action**

Interstitial Emphy-
sæma of Mediastinum

964. VENOUS MURMURS**Præsystolic**

Health

in recumbent position

Systolic

Tricuspid Regurgitation

Diastolic

Anæmia

Dilatation of Aorta

Hypertrophy

Strong Aortic Pulsation

965. Venous Hum

(Bruit de diable)

Anæmia

Chlorosis

in upright position

Enlarged Bronchial

Glands

at manubrium, with patient's head thrown back

966. ARTERIAL MURMURS**Carotid and Subclavian
Systolic Murmur**

Arterio-sclerosis

Aortic Regurgitation

Aortic Stenosis

'When the second sound is audible in the carotids, the aortic valves are still fairly efficient'
(Broadbent)

Femoral**Double Murmur**

Aneurysm

Aortic Regurgitation

Lead-poisoning

Mitral Stenosis

Palmar Arch

Aortic Regurgitation

**AUSCULTATION OF
ABDOMEN****967. SWALLOWING SOUND**

A short splashing murmur heard in health, immediately after swallowing

Absent

Œsophageal Stenosis

**968. Loud Splashing
Sound**

Dilatation of Stomach

969. Friction Sound

Rare

Peritonitis

**970. AUSCULTATION OF
FONTANELLE**

Now abandoned

PART VI

MISCELLANEOUS

CONTRACTIONS: (s), sometimes; (x), exceptionally; I, first stage; II, second stage; III, third stage; *, most probable or characteristic disease.

TIME AND SEASON

971. OF DAY

Asthmatic Paroxysm
early morning

972. Worse at Night

Acute Laryngitis
Diphtheritic Laryngitis
Spasmodic Laryngitis
Influenza
Rheumatism, Chronic
Renal Calculus

The temperature in fevers,
etc., is usually higher at
night (see 101)

973. TIME OF YEAR (London Mortality)

Winter, Prevalent in

Asthma
Bronchitis
Cerebro-spinal Meningitis
Diphtheria
Enteric Fever
Erysipelas

Gout
Hooping-Cough
Heart Disease
Laryngitis
Measles
Pleurisy
Pneumonia
Phthisis
Puerperal Septicæmia
Quinsy
Raynaud's Disease
Rheumatism
Variola

Spring, Prevalent in

Asthma
Bronchitis
Gout
Laryngitis
Measles
Pneumonia
Purpura
Pleurisy
Phthisis
Scurvy
Variola

TIME OF YEAR—*continued*
Summer, Prevalent in

Cholera
 Cholérine
 Diarrhœa
 Dysentery
 Enteritis
 Infantile Paralysis
 Tabes mesenterica
 Weil's Disease

Autumn, Prevalent in

Cholera
 Cholérine
 Dysentery
 Diphtheria
 Enteric Fever
 Erysipelas
 Heart Disease
 Hooping-Cough
 Puerperal Fever
 Quinsy
 Rheumatism
 Scarlatina
 Weil's Disease

974. Periodic

Asthma, Spasmodic
 Ague
 Catalepsy (s)
 Epilepsy
 Intermittent, Pernicious
 Menstrual Disorders
 Migraine
 Neuralgia

Paroxysmal Hæmoglo-
 binuria
 Relapsing Fever

PROPAGATION

975. By Epidemic

Asiatic Cholera
 Beri-beri
 Cerebro-spinal Menin-
 gitis
 Dengué
 Diphtheria
 Dysentery
 Enteric Fever
 Ergotism
 Erysipelas (x)
 Hooping-Cough
 Influenza
 Mumps
 Measles
 Malta Fever
 Pneumonia, Acute (x)
 Plague
 Psittacosis
 Paroxysmal Hæmoglo-
 binuria
 Relapsing Fever
 Roseola
 Rötheln
 Scarlatina
 Typhus
 Variola
 Varicella
 Yaws

976. By Infection

Actinomycosis
 Dengué
 Diphtheria
 Enteric Fever
 Erysipelas
 from wounds
 Glandular Fever
 Hooping-Cough
 Influenza
 Mumps
 Measles
 Plague
 Roseola
 Rötheln
 Scarlatina
 Tuberculosis
 Typhus
 Variola
 Varicella
 Yellow Fever
 Yaws

Also, according to some
 authorities, Acute Rheu-
 matism and Acute
 Pneumonia

977. By Contagion

Diphtheria
 Erysipelas
 Favus
 Farcy
 Glanders
 Gonorrhœa

Hydrophobia
 from rabies
 Hospital Gangrene
 Impetigo contagiosa
 Leprosy (slightly)
 Malignant Pustule
 Molluscum contagi-
 osum
 Porrigo (children)
 Purulent Ophthalmia
 Ringworm
 Syphilis
 Soft Sore
 Scabies
 Yaws

**978. SCHOOL QUARANTINE
After Exposure to Infec-
tion**

Diphtheria, 12 days
 Scarlatina, 14 days
 Measles, 16 days
 Rötheln, 16 days
 Chicken-Pox, 18 days
 Small-Pox, 18 days
 Mumps, 24 days
 Hooping-Cough, 21 days

**After having an Infectious
Disease**

(The body and clothes
 having been disinfected)

Scarlatina

6 weeks from the disap-
 pearance of the rash if
 there be no sore-throat
 or desquamation

SCHOOL QUARANTINE—

continued

Measles

3 weeks from the disappearance of the rash, if peeling and cough have ceased

Rötheln

2 to 3 weeks

Small-Pox and Chicken-Pox

when every scab has fallen off

Hooping-Cough

6 weeks at least from beginning of whoop, provided whoop and spasmodic cough have ceased

Diphtheria

3 weeks after convalescence, provided there be no albuminuria and no discharge from nose, ears, eyes, throat, etc. (the bacillus is often found long after this)

Mumps

4 weeks from the commencement, if all swelling have subsided

979. EXOTIC DISEASES,

ETC.

(As regards England)

Ainhum

coloured races

Ankylostomiosis

India, Egypt, West Indies, etc.

Beri-beri

Bilharzia hæmatobia

Bothriocephalus latus

Switzerland, Italy, Baltic, etc.

Bualama Boil

Chigoe

Cretinism

Cerebro-spinal Meningitis

Dubini's Chorea

Dengué

Dysentery

Distoma pulmonale

Elephantiasis Arabum

Hepatitis, Acute

Hepatic Abscess

Leprosy

Plague

Pernicious Intermittent

Paroxysmal Hæmoglobinuria

Pellagra

Italy

Remittent Fever

Sprue

Yaws

black races only

Yellow Fever

980. RARITY

The following diseases are so rare that they require strong confirmatory evidence for their diagnosis

Anthrax

Acanthosis nigricans

Acroparæsthesia

RARITY—*continued*

Aortitis, Acute
 Aneurysm of Heart
 Aneurysm of Pulmonary
 Artery
 Actinomycosis
 Addison's Disease
 Adeno-lipomatosis,
 Symmetrical
 Atrophy of Brain
 Aortic Stenosis (rela-
 tively)
 Acute Yellow Atrophy
 Atrophy of Kidneys,
 Acute
 Acromegaly
 Athetosis
 Abscess of Heart
 Amyotrophic Lateral
 Sclerosis
 Barlow's Disease
 Brown Induration of
 Lung
 Bell's Mania
 Caisson Disease
 Cardiac Apoplexy
 Cholangitis, Chronic
 Fibrous
 Catalepsy
 Cirrhosis of Stomach
 Chyluria
 Dubini's Chorea
 Erythromelalgia
 Emphysæma, Inter-
 lobular

Encephalitis
 Friedreich's Disease
 Fat Embolism
 Facial Hemiatrophy or
 Hemihypertrophy
 Fibroid Disease of
 Heart
 Growth Fever
 Glanders
 Hydrophobia
 Hydatids (except of
 Liver)
 Hæmophilia
 Hysteria (Male)
 Hereditary Cerebellar
 Ataxy
 Huntington's Chorea
 Intermeningeal Spinal
 Hæmorrhage
 Keloid
 Lymphadenoma
 Leucocythæmia
 Lipomatosis neurotica
 Leprosy
 Lichen ruber
 Meralgia paræsthetica
 Morvan's Disease
 Myxœdema
 Myocarditis
 Mollities Ossium
 Myelitis, Acute
 Myositis ossificans
 Noma
 Osteitis deformans
 Ophthalmoplegia

RARITY—*continued*

Pulmonary Valvular
 Disease
 acquired
 Psittacosis
 Peliosis rheumatica
 Polymyositis
 Pancreatic Affections
 except cancer
 Periarthritis nodosa
 Pyopericardium
 Pyopneumopericardium
 Pericardial Tuberculosis
 Post-pharyngeal
 Abscess
 Periproctitis
 Pseudo-hypertrophic
 Paralysis
 Recklinghausen's
 Disease
 Raynaud's Disease
 Spondylose rhizomé-
 lique
 Symmetrical Adeno-
 lipomatosis
 Spinal Apoplexy
 Syringomyelia
 Splenitis
 Stokes-Adams Disease
 Scleroderma
 Sclerema
 Spinal Paralysis of
 Adults, Acute
 Thomsen's Disease
 Trichinosis

Tetany
 Tricuspid Valvular
 Disease
 primary
 Transposition of Viscera
 Weil's Disease
 Woillez's Disease
 And, in England, Exotic
 Diseases (see 979)

981. SYMMETRICAL LUNG
DISEASES

Bronchitis
 Bronchitis, Capillary
 Bronchial Catarrh
 Congestion, Hypostatic
 Emphysemæ
 Lobular Pneumonia
 Edema
 Acute Miliary Tubercu-
 losis

981a. RÖNTGEN RAYS
Useful in diagnosing—

Aneurysms
 Coxa vara
 Dilatation of Stomach
 after bismuth
 Exostoses
 Heart Enlargements
 Impacted Foreign
 Bodies
 especially metal objects
 Renal Calculus
 often invisible
 Tumours, Solid
 The fluorescent screen is
 the more convenient form

980-981a

982. Compound or Generic Symptoms, with some of the conditions they include

Anæmia.—Pallor of skin and mucous membranes, pearly conjunctiva, waxy ears, breathlessness on exertion, palpitation, headache, amenorrhœa, and, sometimes, œdema pedum (see 225).

Collapse.—Pallor, cold sweats, pinched features (facies Hippocratica), feeble action of heart, nearly imperceptible and rapid pulse, partial loss of consciousness (see 142).

Coma.—Loss of consciousness, insensible conjunctiva, stertorous breathing, flapping cheeks, altered pupils, involuntary evacuations, and usually a slow pulse (see 28).

Dyspepsia.—Pain in stomach and back, flatulence, furred tongue.

Debility.—Weakness of limbs, shortness of breath on exertion, weak first sound of heart (see 140).

Acute Dyspnoea.—Breath short, face wet and livid, countenance anxious, orthopnoea, alæ nasi dilating, speech interrupted (see 726).

Hectic.—High evening temperature, morning perspiration, red spot on cheek of otherwise pale face, eyes bright, mind clear, pulse rapid (see 840).

Hyperpyrexia.—Temperature over 106°, delirium, rapid microtous pulse (see 833).

Irritant-poisoning.—Vomiting, diarrhœa, pain and tenderness in epigastrium, collapse (see 612).

Jaundice.—Yellow skin and conjunctiva, dark urine, pale stools, slow pulse (see 230).

Meteorism and Tympanites.—Distended abdomen, displacement of heart, with rapid and perhaps irregular action, shortness of breath (see 924).

Portal Obstruction.—Ascites with, later, œdema pedum; jaundice or earthy complexion, enlarged abdominal veins, hæmorrhoids.

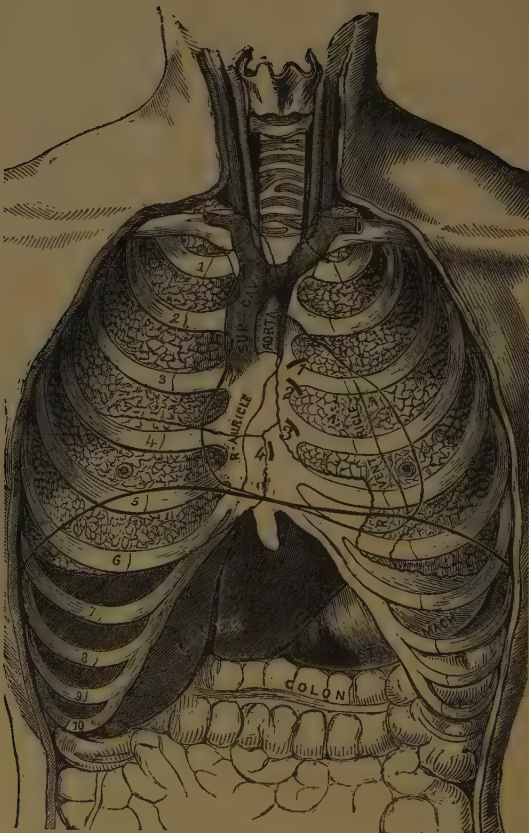
Pyrexia.—Thirst, high temperature, rapid pulse, furred tongue, scanty high-coloured urine with sediment (see 831).

Typhic State.—Muttering delirium, stupor or coma vigil, involuntary evacuations, subsultus tendinum, temperature 104° or more, passive congestion of lungs and skin of back, finally Cheyne-Stokes respiration (see 143).

983. Synonyms

Adiposis dolorosa	= Lipomatosis neurotica Now considered a form of myxœdema
Amyotrophic Lateral Sclerosis	= Charcot's Disease
Anterior Poliomyelitis	= Infantile Paralysis
Atrophic Spinal Paralysis, Acute	= Adult form of Infantile Paralysis
Barlow's Disease	= Infantile Scurvy
Bulbar Paralysis	= Labio-glosso-laryngeal Paralysis
Blackwater Fever	= Paroxysmal Hæmoglobin- uria
Bright's Disease	= Nephritis
Contracted Kidney	= Cirrhosis of Kidney
Cyanotic Kidney	= Passive Congestion of Kidney
Cheirpompholyx	= Dysidrosis (Fox)
Erb's Paralysis	= Neuritis of Brachial Plexus
Friedreich's Disease	= Hereditary Ataxic Para- plegia

Glénard's Disease	= Enteroptosis
Gastritis	= Gastric Catarrh
Infective Endocarditis	= Malignant Endocarditis
Kussmaul's Disease	= Periarteritis nodosa
Landry's Paralysis	= { Acute Ascending Para- lysis Polyneuritis infectiosa
Lymphadenoma	= Hodgkin's Disease
Osteo-arthritis	= Rheumatoid Arthritis, or A. deformans
Primary Lateral Sclerosis	= { Primary Spastic Para- plegia Spasmodic Spinal Para- lysis
Progressive Muscular Atrophy	= Poliomyelitis chronica
Paralysis agitans	= Parkinson's Disease
Pulmonary Osteo-arthro- pathy	= Marie's Disease
Peliosis rheumatica	= Schönlein's Disease
Raynaud's Disease	= Symmetrical Gangrene
Syringomyelia	= Hydorrhachis interna
Spinal Apoplexy	= Hæmorrhage into Cord Substance
Spastic Cerebral Para- plegia	= Little's Disease
Weil's Disease	= Acute Infective Jaundice
Woillez's Disease	= Acute Idiopathic Pul- monary Congestion
Xeroderma pigmentosa	= Kaposi's Disease



SOME OF THE PRINCIPAL VISCERA IN SITU
(From Gray's 'Anatomy')

PART VII

METHODS OF DIAGNOSIS, FOR THE USE OF CLINICAL CLERKS, ETC.

METHODS OF DIAGNOSIS

984. Age.—Before the patient is asked his age, he should be closely scrutinised and his age estimated. The clinical clerk should place this estimate in brackets against the real age. He will become in time a good judge, and any great discrepancy between the real and the apparent age is an important factor in prognosis.

985. Nutrition.—The patient may be described roughly as well or ill nourished, but for exact results he should be weighed and measured, and the result compared with Hutchinson's Table. It is almost impossible to carry this table in one's head. I have therefore devised the following formula: The weight of a person 5 ft. high should be 115 lb. For every additional inch of stature add 5 lb. Thus for 6 ft. it would be $115 + (5 \times 12) = 175$; a margin of 20 per cent. either way is consistent with health. In the case of infants the weight for the first month may be taken as 8 lb. At six months this should be doubled, and at thirteen months trebled.

986. Sex.—Note whether puberty has commenced, and in the case of females whether the menses are regular, excessive, deficient, or absent.

987. History.—The text gives the heads upon which information is valuable. Cross-examination is sometimes necessary, especially with uneducated people. A ‘complication of diseases,’ given as the cause of death of a relative, will be found generally to include dropsy, and a few questions will usually elicit enough information to determine whether this was renal, cardiac, hepatic, or pulmonary. In the same way a ‘cold’ may be ascertained by questions as to duration, wasting, cough, and hæmoptysis to have been in reality phthisis. A statement of the causes of the deaths in the family is, however, not sufficient. Inquiry must be made as to whether any living member of the family is suffering from hereditary disease.

988. Pain.—It is often difficult to estimate the degree of pain felt, for the patient’s statement cannot always be relied upon. Some information may be obtained from a scrutiny of the expression, and some, too, from the time spent in sleep. If a patient profess to be in constant acute pain, and nevertheless sleep five or six hours at a stretch, credence must be withheld.

989. Tenderness.—A patient should not be asked if pressure give pain; but, in the midst of conversation, the part should be pressed, at first very gently, but afterwards with the force gradually increased. The countenance should be watched all the time, and will probably speak more truthfully than the tongue.

990. Hyperæsthesia.—It is important to distinguish this from tenderness; it is more superficial and may be elicited by the lightest brush with the finger. The æsthesiometer, for which a rough substitute may be found in a pair of compasses, is more especially useful

when it is desired to have a record of the degree of sensation for comparison with another of a different date.

Patients describe their sensations most variously. In such cases it may be permissible to ask leading questions with a view to getting them under one or other of the heads adopted in the text. The author once saw a patient in a great state of alarm, because he imagined that a fly had obtained access to his head through the ear and was buzzing about inside his skull. This was, of course, a form of tinnitus aurium, and it disappeared with the advent of a discharge from the meatus. Any odd sensation, affirmed to be absolutely indescribable, but referred to the sternum or epigastrium, may pretty safely be attributed to dyspepsia.

991. Skin.—The presence of œdema is ascertained by making a depression with the end of one finger, and, immediately afterwards, brushing the pulps of the other fingers across it. If the depression is still palpable, there is œdema. Tache cérébrale is elicited by drawing a line with the back of the nail across the skin of the abdomen; after a few seconds a red streak should appear and remain visible for about half a minute. A chronic unhealthy flush, such as patients commonly complain of as being no guide to their condition, may usually be distinguished from a healthy colour by the presence of twigs of dilated arterioles and venules. To detect parasitic fungi, soak the hair or scales in ether, transfer them to the slip, and drop on them a little dilute liquor potassæ before putting on the cover-glass. Jaundice may be distinguished from other yellow discolorations of the skin by the conjunctiva being also involved; but care must be

taken not to be deceived by the subconjunctival fat which gives a yellow colour to many persons' eyes.

992. Eyes.—The reaction of the pupils to light is ascertained by first covering over the eyes with the hand, and then, with a bright light directly in front of the patient, suddenly removing the hand and noting the rapidity with which the pupils contract; it should be so great as to be difficult to follow. The reaction to accommodation is determined by directing the patient to look at the surgeon's finger at sixteen inches distance; the finger is then made to approach the eyes and the effect upon the pupils is noted.

993. Ophthalmoscope. — To examine the fundus oculi with the ophthalmoscope (Liebreich's), the pupil must first be dilated with a few drops of atropine solution; the patient should be seated in a darkened room, and a bright light placed on his left side, on a level with, and a little behind, his eyes. The observer sits facing him on a somewhat higher chair, with a space of eighteen or twenty inches between the two heads; he then looks through the hole in the mirror, holding the latter at such an angle as to throw a beam of light upon the patient's eye. This is the direct method. The indirect examination consists in interposing a lens of about two-inch focus; this is held an inch or so in front of the patient's eye with the finger and thumb of the disengaged hand, and steadied by resting the remaining fingers on his forehead. To see the optic nerve the patient is told to fix his gaze upon the tip of the surgeon's more distant ear, and the observer by means of a slight circumductory motion of his head is able to inspect the entire fundus. The yellow spot is best seen by directing the patient to look through the hole in the mirror; assistance may

be obtained from most sitters by telling them to look in specified directions.

994. Laryngoscope.—For laryngoscopic examination the disposition of the sitters is similar, but the mirror has to be bound to the surgeon's head in such a way that he can see through the hole and, at the same time, without any constrained position, throw a stream of light on to the pharynx of the patient. The latter should open his mouth wide, protrude his tongue, and hold it firmly with a handkerchief between his finger and thumb, thus avoiding the necessity for the use of a tongue-depressor. The surgeon then takes a medium-sized mirror from his waistcoat-pocket, where it has been kept warm, and puts it far back into the patient's throat in such a way as to just avoid touching the pillars of the fauces, the uvula, and the posterior wall of the pharynx. The patient should now be directed to say 'A-h-h-h!' and if necessary may also run through the vowel sounds and the gamut.

To examine the posterior nares, the smallest-sized hand mirror is used, and the reflecting surface is turned upwards instead of downwards.

995. Limbs.—To determine whether these are of equal length, fix one end of a tape measure against the anterior superior spine of the ilium, and the other against the tip of the inner malleolus. The arm may be measured from the acromion process to the base of the styloid process of the radius, the forearm being midway between pronation and supination.

996. THE URINE.—Where it is necessary to ascertain the exact quantity, the entire proceeds of twenty-four hours must be collected and measured. Its reaction is ascertained by dipping in it the end of a

strip of litmus paper ; if acid, blue litmus is turned red ; if alkaline, red litmus is turned blue, and this blue, if due to a volatile alkali, disappears when the paper is warmed. An amphoteric reaction means that red litmus is turned blue and blue litmus red.

Sugar.—Boil a little Fehling's solution, and while boiling, if no precipitate forms, add the urine drop by drop until the quantity equals that of the Fehling ; a reddish-yellow precipitate will result if sugar be present. Half an hour must elapse in doubtful cases.

Caution.—This reaction is also given by the presence in the urine of alkapton, chloroform, chloral, salicylic acid, and, if in great excess, by uric acid, pentose, creatin, and creatinin.

Albumen.—Acidulate with a little dilute hydrochloric acid unless the urine be markedly acid ; then boil, and finally add a few drops of strong nitric acid. Should albumen be present, a flocculent precipitate will form. For minute quantities, which are rarely of much clinical import, a saturated solution of picric acid may be used.

Bile.—Bile-pigment is detected by putting a little of the urine on a porcelain plate in lateral contact with a few drops of strong nitric acid, when a play of prismatic colours will be observed between them. Bile acids are tested for by shaking up some of the urine with a little syrup until a froth is produced ; a drop of strong sulphuric acid allowed to flow down the side of the test-tube develops a purple colour on reaching the froth.

Casts, Crystals, etc.—The urine must be left to stand in a conical glass for a couple of hours. A little of the sediment taken up with a pipette is dropped upon a glass slide, covered, and examined with a quarter-inch objective. Only moderate illumination should be

employed for casts. The use of a centrifuge greatly hastens matters.

Albumose.—Filter off the precipitated albumen. On the addition of liquor potassæ and a few drops of a one per cent. solution of sulphate of copper to the filtrate, a violet colour will develop.

Blood.—This may be fairly abundant even in pale urine. On boiling with one-third its volume of liquor potassæ a well-marked, red, flocculent precipitate will gradually form if blood be present (Heller's test).

Uryhæmatin.—The hæmatin is sometimes converted into uryhæmatin; the urine is then pale. To restore the red colour add hydrochloric acid.

Ehrlich's Test.—A mixture of 50 c.c. of half per cent. solution of sulphanilic acid, with 1 c.c. of half per cent. solution of nitrite of soda, is added to an equal quantity of urine, and then well shaken with one-eighth the volume of ammonia. A bright red foam will result if the case be one of enteric fever. (See 557.)

997. THE BLOOD.—In the absence of a hæmacytometer, an approximate estimate of the number of leucocytes in each cubic m.m. may be obtained by the following formula: Multiply the number of leucocytes visible in the field of a microscope that magnifies 500 diameters by 1,600. An average should be struck from the examination of several fields.

998. THE VOMIT.—Free Hydrochloric Acid.—Take about half a drachm of the vomit, and add an equal quantity of Günsberg's reagent on a porcelain dish. A red band will appear on evaporation. The reagent is somewhat unstable, and I find it more convenient to soak paper in it. The test paper thus prepared, when heated over a flame, gives the red coloration in the presence of free hydrochloric acid.

999. THE SPUTA.—Elastic Tissue.—The presence of elastic tissue is generally indicated when flocculi are observed. To see the hooked and curled fibres under the microscope, the sputa should be boiled with caustic soda and the sediment examined with a half-inch objective.

Bacillus Tuberculosis.—The dry cover-slip preparation is stained for fifteen minutes in warm carbol-fuchsin (Ziehl's) solution. It is then left for a few seconds in a five per cent. solution of sulphuric acid. After washing with water, it should be stained with methylene blue. Wash again and dry. The bacillus tuberculosis will appear red ; all others, blue.

1000. REFLEX PHENOMENA. — Knee-Jerk. — The patient should cross his legs somewhat loosely and grasp something. The examiner then strikes the ligamentum patellæ with the edge of his hand. A sudden jerk of the foot should follow.

Ankle-Clonus.—With the patient's leg extended, sudden, firm, and continued pressure is made upwards upon the ball of the foot. The result is a series of clonic contractions at the ankle joint as long as the pressure is maintained.

1001. ELECTRICAL REACTION. — The indifferent electrode, moistened with warm water only, should be placed upon the sternum, sacrum, or upper part of the back ; the small, exciting electrode over the muscle at one of Ziemssen's motor points. In health, K.C.C. (kathode closing contraction) requires the weakest current, and K.O.C. the strongest. A.O.C. (anode opening contraction) and A.C.C. are intermediate.

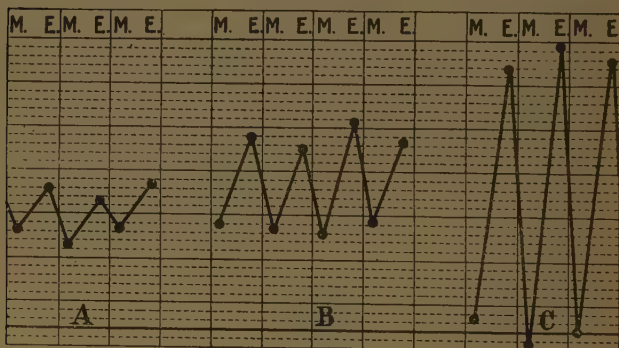
1002. THE PULSE.—The normal rate in adult life is about 70. In infants it is 120 to 130, in childhood 100, in adolescence 80 to 90, and in old people 60.

The pulse should not be counted until the patient has become accustomed to the presence of the physician. Should the artery appear small, the pulse of the other hand should be felt, as there may be some abnormal distribution. The force of the pulse is roughly determined by placing three fingers on the radial artery and estimating what pressure of the proximal finger is necessary to prevent the pulse being felt by the other two. One of the most important points to determine about the pulse is arterial tension. It is a guide not only to diagnosis, but also to treatment. The tension is high when the artery is full between the beats and can be rolled under the finger like a tendon. Pulsus bigeminus can be excluded by counting the heart-beats. The sphygmograph must be learnt from demonstration. It is well to remember that the tracing in a given form of valvular disease is often very different at different stages (see 862).

1003. TEMPERATURE.—This may be taken sufficiently well for all ordinary purposes in the armpit. Indeed, considering the difficulty of sterilising a thermometer, this is preferable to the mouth, which is, however, half a degree higher. The register must be shaken down first to 97°, or, if it is desired to ascertain a subnormal temperature, as low as it will go. The patient's clothing is then undone in front, the elbow well separated from the side, and the bulb of the thermometer placed midway between the folds of the previously dried axilla, care being taken that no portion of the clothing intervenes. The elbow is then again brought to the side, the fore-arm being flexed and the hand placed on the breast-bone. Should the instrument feel loose, pressure must be kept up on the outer side of the arm. At the end of three minutes it

may be carefully withdrawn, jerking being especially avoided; the bottom of the register will indicate the temperature. It is useful to remember that 37° Centigrade = 98.6° Fahrenheit. To convert them, add 1.8° F. for every degree C.; thus 40° C. = 104° F.

1004. PALPATION.—The position of the heart's apex is ascertained by feeling with the pulp of the forefinger for the point where the impulse is strongest.



TYPES OF TEMPERATURES

A, continued; B, remittent; C, severe or septic remittent

Normally it is in the fifth left space, two inches below, and one inch to the inner side of the nipple. In children under eleven, it is higher.

The most difficult region to explore is the abdomen; especially in fat subjects. To detect fluctuation the nurse should be directed to place the edge of her hand in the mesial line. The left hand of the investigator is placed flat on one flank while the finger of the other hand is flicked against the opposite flank. A wave

will be felt if fluid be present. Abdominal tumours are sought for by placing the flat of the hand upon the abdomen and combining firm and even pressure with a movement of circumduction. The physician's hand must be warm, and the patient must keep the abdominal muscles relaxed; he should, therefore, lie on his back with his shoulders high, his knees drawn up, and his mouth open, or, as an alternative, adopt the knee-elbow position. In the case of the spleen or liver, the physician should press the organ forward with his other hand, and the patient should take a deep inspiration. I have known the edge of the quadriceps lumborum mistaken for the spleen. The character of the liver's edge and surface must be noted.

If a tumour should be discovered, the additional points to elucidate are, whether it can be traced into the pelvis or into the loins; whether, like a fæcal accumulation, it can be made to pit upon pressure; and whether, like tumours connected with the liver and spleen, it rises and falls with respiration. The examination is facilitated by the previous administration of an enema, and, still more, by an anæsthetic. (See also *Gaseous Test*, 928.)

1005. Enlarged Glands.—The area from which these draw their lymphatics should be searched for sources of irritation. There are no lymphatic glands lower than the poplitæal space and the bend of the elbow.

1006. PERCUSSION.—Deep percussion is best effected by using two fingers for a plessor; superficial, by using the middle finger only. The finger struck should be pressed so firmly into the patient's flesh as to be practically incorporated with it. The shoulder and

elbow joints should be fixed, and the necessary motion be made exclusively at the wrist joint.

1007. Cracked-Pot Sound.—To bring this out, the patient should open his mouth and turn his head away.

Heart Dulness.—Superficial cardiac dulness represents the small area which normally is uncovered by lung. It extends from the left edge of the sternum and from the fourth left rib downwards to the heart's apex. The deep cardiac dulness is bounded by the right edge of the sternum, the third left rib, and a point one inch to the left of the heart's impulse.

1008. Liver Dulness.—This should not extend below the edge of the ribs. Its upper margin should reach the fourth rib in front, the seventh rib at the side, and the tenth rib behind, on heavy percussion. Percussion of the liver below the ribs is often vitiated by conducted resonance.

Splenic Dulness.—A dullish note in the mid-axillary line opposite the ninth, tenth, and eleventh ribs.

1009. Diaphragm.—The diaphragm, at the end of inspiration, should reach the lower border of the seventh rib in the axilla.

1010. 'Diaphragm Phenomenon.' — On looking obliquely at the patient's side, the movement of the lung where it follows the descent of the diaphragm may be seen. This appearance is absent under certain conditions. (See 428.)

Thrill.—To detect a thrill on percussion, place three fingers flat on the part and tap the middle finger.

1011. AUSCULTATION.—Never attempt to auscultate in a constrained position. In the case of the back a towel may replace the stethoscope, the patient being told to lean forward and cross his arms. It is sometimes difficult to get a patient to breathe deeply enough.

In that case he should be told to hold his breath while the heart is being examined. His after-dyspnoea may then be taken advantage of for the auscultation of the lungs.

1012. Bell Sound.—The physician puts his ear to the back while an assistant with a coin flat upon the chest taps this with a second coin.

1013. Pectoriloquy.—This is best heard when the patient whispers ; the effect is that of listening at a speaking-tube.

1014. Bronchophony, unlike pectoriloquy, is inarticulate. *Ægophony* is rarely heard. It is bleating in character.

1015. HEART.—It is not always easy to distinguish the first from the second sound. To do so, start at the apex—the systolic sound will synchronise with the upheaval ; then move the stethoscope gradually towards the base, keeping in touch all the time with the sounds as first heard. The rhythm of the mitral and tricuspid sounds is usually a trochee (— ∪) ; that of the aortic and pulmonary an iambic (∪ —).

1016.—Examination of Children.—The practitioner must give the child time to get used to his presence by first getting all the information possible from the nurse or mother. He may then ask the child to shake hands, and at the same time can feel his pulse. If the suspicious patient will not put out his tongue, he will probably open his mouth when asked, and this will do nearly as well ; the opportunity may then be taken to pass the finger rapidly over the gums. The chest should next be listened to, and if a stethoscope is employed, which is seldom necessary, the child should previously have been allowed to examine it under the specious name of trumpet. Percussion should follow,

not precede, auscultation, and, as a rule, one finger only is necessary to form the plessor. The throat must be examined by using the handle of a teaspoon as a tongue-depressor; the examination nearly always sets the child crying, but this is of less importance now, as the ordeal is nearly over, and the cry affords an opportunity to determine the vocal fremitus and resonance.

1017. Dentition.—A child should cut the first teeth, the central incisors, at $6\frac{1}{2}$ to 7 months; the last, the posterior molars, at 27 months. At the age of 12 months he should have twelve teeth.

1018. Fallacies of Perspective.—These are of two kinds. That of the old general practitioner lies in the assumption that his patient is the subject of some common disorder. That of the advanced student and junior consultant that he is the subject of a rare disease. Hospitals are centres for rare diseases, and the one class sees too few, the other too many, of them.

A large number of remarks on methods of diagnosis, differential diagnosis, etc., as well as many symptoms not easily amenable to classification, will be found scattered through the text.

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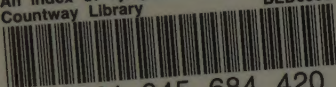
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